United States Bankruptcy Court Eastern District of New York, Brooklyn Division

IN RE:		Case No.	
Dorso, Michael J		Chapter 7	
	Debtor(s)	•	
	VERIFICATION OF CREI	DITOR MATRIX	
The above named debtor(s) or at correct to the best of their knowl	•	ify that the attached matrix (list of creditors) is true and	
Date: November 7, 2017	/s/ Michael J Dorso Debtor		
	Joint Debtor		
	/s/ Kevin Zazzera Attorney for Debtor		

Amca 2269 S Saw Ml Elmsford, NY 10523

Capital One 15000 Capital One Dr Richmond, VA 23238-1119

Capital One Attn: General Correspondence/Bankruptcy PO Box 30285 Salt Lake City, UT 84130-0285

Citi Bank PO Box 183113 Columbus, OH 43218-3113

Citibank Centralized Bk/Citicorp Credit Srvs PO Box 790040 Saint Louis, MO 63179-0040

Citibankna 1000 Technology Dr O Fallon, MO 63368-2239

Discover PO Box 71084 Charlotte, NC 28272-1084 Dsnb Macys PO Box 8218 Mason, OH 45040-8218

Kohls/Capital One Kohls Credit PO Box 3043 Milwaukee, WI 53201-3043

Kohls/capone N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051

Rushmore Loan Mgmt Ser 15480 Laguna Canyon Rd Irvine, CA 92618-2132

Sa-Vit Collection Agen 46 W Ferris St East Brunswick, NJ 08816-2159

Santander Bank NA 865 Brook St Rocky Hill, CT 06067-3444

Toyota Motor Credit 4 Gatehall Dr Ste 350 Parsippany, NJ 07054-4522 Toyota Motor Credit Co Toyota Financial Services PO Box 8026 Cedar Rapids, IA 52408-8026

Visa Dept Store National Bank/Macy's Attn: Bankruptcy PO Box 8053 Mason, OH 45040-8053

Wells Fargo Bank c/o Stein, Weiner & Roth, LLP 1 Old Country Rd Ste 113 Carle Place, NY 11514-1847

B201B (Form 201B) (12/09)

United States Bankruptcy Court Eastern District of New York, Brooklyn Division

IN RE:	Case No
Dorso, Michael J	Chapter 7
Debtor(s)	

CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S)

UNDER § 342(b)	OF THE BANKRUPTCY C	ODE
Certificate of [Non-At	torney] Bankruptcy Petition	Preparer
I, the [non-attorney] bankruptcy petition preparer signing notice, as required by § 342(b) of the Bankruptcy Code.	he debtor's petition, hereby certif	fy that I delivered to the debtor the attached
Printed Name and title, if any, of Bankruptcy Petition Prep Address:		Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)
X Signature of Bankruptcy Petition Preparer of officer, prince partner whose Social Security number is provided above.		(Required by 11 U.S.C. § 110.)
Cert	ificate of the Debtor	
I (We), the debtor(s), affirm that I (we) have received and	read the attached notice, as require	red by § 342(b) of the Bankruptcy Code.
Dorso, Michael J	X /s/ Michael J Dors	o 11/07/2017
Printed Name(s) of Debtor(s)	Signature of Debtor	Date
Case No. (if known)	X Signature of Joint D	Nobton (if any)
	Signature of Joint D	Debtor (if any) Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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Fill in this inform	nation to identify your	case:				
Debtor 1	Michael J Dorso					
Dobtor 2	First Name	Middle Name		Last Name	_ }	
Debtor 2 (Spouse if, filing)	First Name	Middle Name		Last Name	_	
United States Bar	nkruptcy Court for the:	EASTERN DISTRIC	CT OF NEW	YORK, BROOKLYN DIVISION	_	
Case number(if known)						☐ Check if this is an amended filing
Official For		on for Indiv	iduals	Filing Under Ch	napter i	7 12/15
Otatomer	it or interitie	minut	<u>iaaais</u>	Timing Crider Cr	iaptoi	1 12/13
If you are an indiv	idual filing under chap	pter 7, you must fill o	out this form	if:		
creditors have	claims secured by you	ur property, or				
You must file this	er is earlier, unless the	ithin 30 days after yo	ou file your b	ankruptcy petition or by the dee. You must also send copies		
•	ople are filing together e the form.	in a joint case, both	are equally	responsible for supplying cor	rect informati	on. Both debtors must sign
	nd accurate as possibl our name and case nun		eeded, attac	n a separate sheet to this form	n. On the top	of any additional pages,
Part 1: List Yo	our Creditors Who Have	e Secured Claims				
		art 1 of Schedule D: 0	Creditors Wh	o Have Claims Secured by Pro	operty (Offici	al Form 106D), fill in the
information bel Identify the cre	low. ditor and the property t	hat is collateral	What do yo	ou intend to do with the proper	rty that	Did you claim the property
			secures a	lebt?		as exempt on Schedule C?
Creditor's			☐ Surrende	er the property.		□ No
name:				he property and redeem it.		_
Description of				e property and enter into a Reaft	firmation	☐ Yes
property			Agreem ☐ Retain th	ent. e property and [explain]:		
securing debt:				o property and [explain].		
Creditor's			Surrende	er the property.		□ No
name:				he property and redeem it.		
			☐ Retain th	e property and enter into a Reaft	firmation	
Description of property			Agreem			☐ Yes
						☐ Yes
			☐ Retain th	ent. e property and [explain]:		☐ Yes
securing debt:			☐ Retain th			☐ Yes
						☐ Yes
securing debt:			□ Surrende	er the property. he property and redeem it.		□ No
Securing debt: Creditor's name:			☐ Surrendo☐ Retain t	er the property. the property and redeem it. the property and enter into a Reaff	firmation	
securing debt: Creditor's			☐ Surrendd☐ Retain t☐ Retain th	er the property. the property and redeem it. the property and enter into a Reaff	firmation	□ No

Official Form 108

Creditor's

☐ Surrender the property.

☐ No

Debtor 1 Dorso, Michael J	Case number (if known)	
name:	☐ Retain the property and redeem it.☐ Retain the property and enter into a <i>Reaffirmation</i>	☐ Yes
Description of	Agreement.	
property	☐ Retain the property and [explain]:	
securing debt:		-
Part 2: List Your Unexpired Personal Proper	ty Leases you listed in Schedule G: Executory Contracts and Unexpired	eases (Official Form 106G), fill in
the information below. Do not list real estate lea	ases. Unexpired leases are leases that are still in effect; the leas ase if the trustee does not assume it. 11 U.S.C. § 365(p)(2).	
Describe your unexpired personal property lea	ases	Will the lease be assumed?
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Part 3: Sign Below		
Under penalty of perjury, I declare that I have in property that is subject to an unexpired lease.	ndicated my intention about any property of my estate that secu	res a debt and any personal
X /s/ Michael J Dorso	X Signature of Debtor 2	
Michael J Dorso Signature of Debtor 1	Signature of Debtor 2	
Date November 7, 2017	Date	

Official Form 108

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NEW YORK, BROOKLYN DIVISION		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amende filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exan	e the name that is on government-issued ire identification (for nple, your driver's	Michael First name	First name
	licen	se or passport).	Middle name	Middle name
	iden	g your picture tification to your meeting the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ide your married or den names.		
3.	you num Indi	r the last 4 digits of r Social Security liber or federal vidual Taxpayer tification number	xxx-xx-5841	

	Case number (if known)		
About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.		
Business name(s)	Business name(s)		
EINs	EINs		
119 Woehrle Ave	If Debtor 2 lives at a different address:		
Staten Island, NY 10312-1943 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
Richmond			
County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		
	■ I have not used any business name or EINs. Business name(s) EINs 119 Woehrle Ave Staten Island, NY 10312-1943 Number, Street, City, State & ZIP Code Richmond County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason.		

Deb	otor 1 Dorso, Michael J				Case number (if known)		
Par	t 2: Tell the Court About	our Bankruptcy	Case				
7.	The chapter of the Bankruptcy Code you are			nch, see <i>Notice Required by 1</i> ° check the appropriate box.	1 U.S.C. § 342(b) for Individuals Filing for Ban	kruptcy (Form	
	choosing to file under	Chapter 7					
		☐ Chapter 11					
		☐ Chapter 12					
		☐ Chapter 13					
8. How you will pay the fee I will pay the entire fee when I file my petition. Please check with the cabout how you may pay. Typically, if you are paying the fee yourself, your lf your attorney is submitting your payment on your behalf, your attorney me pre-printed address.				self, you may pay with cash, cashier's check, o	or money order.		
					n, sign and attach the Application for Individual	ls to Pay The	
		☐ I request t	d to, waive your fee, an	You may request this option d may do so only if your incom	only if you are filing for Chapter 7. By law, a ju e is less than 150% of the official poverty line	that applies to	
				le to pay the fee in installments Waived (Official Form 103B) a	 If you choose this option, you must fill out thand file it with your petition. 	ie Application	
9.	Have you filed for	■ No.					
	bankruptcy within the last 8 years?	☐ Yes.					
	,	Distri	ct	When	Case number		
		Distri		When	Case number		
		Distri	et	When	Case number		
10.	Are any bankruptcy cases pending or being filed by	■ No					
	a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
		Debto	or		Relationship to you		
		Distri	ct	When	Case number, if known		
		Debto	or		Relationship to you		
		Distri		When	Case number, if known		
11.	Do you rent your	■ No. Go t	o line 12.				
	residence?	☐ Yes. Has	your landlord obtained	an eviction judgment against y	ou and do you want to stay in your residence?	,	
			No. Go to line 12.				
			Yes. Fill out <i>Initial</i> S bankruptcy petition		udgment Against You (Form 101A) and file it	with this	

Deb	tor 1 Dorso, Michael J				Case number (if known)			
Part	Report About Any Bus	sinesses \	ou Own	as a Sole Proprieto	or			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	No. Go to Part 4.					
		☐ Yes.	☐ Yes. Name and location of business					
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any					
	If you have more than one sole proprietorship, use a		Numb	er, Street, City, Stat	e & ZIP Code			
	separate sheet and attach it to this petition.		Chec	k the appropriate box	x to describe your business:			
	•				ess (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))			
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))			
				None of the above				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 1 U.S.C. 1116(1)(B).						
	For a definition of small	■ No.	I am not filing under Chapter 11.					
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.					
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Part	t 4: Report if You Own or	Have Any	Hazardo	us Property or Any	Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat of							
	imminent and identifiable hazard to public health or		What is	the hazard?				
	safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	Number, Street, City, State & Zip Code			

Debtor 1 Dorso, Michael J Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

About Debtor 1:

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

You must check one:

I received a briefing from an approved credit

counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about

credit counseling because of:

П Incapacity.

> I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Dorso, Michael J			Case number	Case number (if known)			
Par	t 6: Answer These Question	ons for Re	porting Purposes					
16.	What kind of debts do you have?	16a.		onsumer debts? Consumer debts are define onal, family, or household purpose."	ed in 11 U.S.C.§ 101(8) as "incurred by an			
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you ow	ve that are not consumer debts or business de	ebts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter	7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.		I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?				
	administrative expenses		■ No					
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do	1 -49		□ 1,000-5,000	□ 25,001-50,000			
	you estimate that you owe?	☐ 50-99		5001-10,000	5 0,001-100,000			
		☐ 100-19 ☐ 200-99	· ·	□ 10,001-25,000	☐ More than100,000			
19.	How much do you	□ \$0 - \$5	50.000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion			
	De Wortin:		001 - \$500,000	□ \$50,000,001 - \$100 million	□ \$10,000,000,001 - \$50 billion			
		\$500,0	001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
20.	How much do you	□ \$0 - \$5	50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?		01 - \$100,000	☐ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
	De:	_ ` `	001 - \$500,000	□ \$50,000,001 - \$100 million	\$10,000,000,001 - \$50 billion			
		\$500,0	001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
Par	t7: Sign Below							
For	you	I have exa	mined this petition, and I decla	are under penalty of perjury that the information	n provided is true and correct.			
				, I am aware that I may proceed, if eligible, ι ilable under each chapter, and I choose to pro	under Chapter 7, 11,12, or 13 of title 11, United oceed under Chapter 7.			
			ney represents me and I did no ined and read the notice requir	ot pay or agree to pay someone who is not an red by 11 U.S.C. § 342(b).	attorney to help me fill out this document, I			
		I request	relief in accordance with the c	chapter of title 11, United States Code, speci	fied in this petition.			
		case can		concealing property, or obtaining money or pro or imprisonment for up to 20 years, or both. 1	operty by fraud in connection with a bankruptcy 8 U.S.C. §§ 152, 1341, 1519, and 3571.			
		Michael	J Dorso of Debtor 1	Signature of Debtor	2			
		Executed		Executed on				
			MM / DD / YYYY	MM	/ DD / YYYY			

Debtor 1 Dorso, Michael J		Case	Case number (if known)			
For your attorney, if you are represented by one If you are not represented by an attorney, you do not need	I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.					
to file this page.	/s/ Kevin Zazzera Signature of Attorney for Debtor	Date	November 7, 2017 MM / DD / YYYYY			
	Kevin Zazzera					
	Printed name Kevin B. Zazzera, Esq. Firm name					
	182 Rose Ave Ste 3 Staten Island, NY 10306-2900 Number, Street, City, State & ZIP Code					
	Contact phone	Email address	kzazz007@yahoo.com			
	Bar number & State		<u> </u>			

Fill in this inform	nation to identify	very sees and thi	o filing.				
Debtor 1		your case and thi	s ming:				
Debtor 1	Michael J D First Name		Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle	Name	Last Name			
-	nkruptcy Court for			CT OF NEW YORK, BROOKLYN DIVISIO	N		
	., .,			,		_	
Case number _							Check if this is an amended filing
Official Fo	rm 106A/E	<u> </u>					
Schedul	e A/B: P	roperty					12/15
think it fits best. B information. If mor Answer every ques	e as complete and a space is needed, stion. Each Residence, B	accurate as possible attach a separate sh uilding, Land, or Oth	e. If two reet to the	only once. If an asset fits in more than one of narried people are filing together, both are existence is form. On the top of any additional pages, we state You Own or Have an Interest In ence, building, land, or similar property?	qually responsible f	or supplyir	ng correct
□ No. Go to Par	, ,	anabio intoroot in ai	iy roolaa	nico, sananig, iana, or cinimal property .			
_	s the property?						
	p		18 0				
1.1			What	is the property? Check all that apply Single-family home	Do not deduct secu	red claims	or exemptions. But
119 Woeh		do ti	_	Duplex or multi-unit building	the amount of any	secured clai	ms on Schedule D: ecured by Property.
Street address,	if available, or other de	scription		Condominium or cooperative	Oreanors with that	o olalinis od	cured by Property.
				Manufactured or mobile home	Current value of ti	ne Cu	rrent value of the
Staten Isl		10312-1943		Land	entire property?	ро	rtion you own?
City	State	ZIP Code		Investment property Timeshare	\$571,000		\$571,000.00
				Other	(such as fee simp	le, tenancy	ownership interest by the entireties, or
				has an interest in the property? Check one Debtor 1 only	a life estate), if kn		ty
Richmone	b			Debtor 2 only			
County				Debtor 1 and Debtor 2 only	☐ Check if this		ity property
			Other	At least one of the debtors and another information you wish to add about this item	(see instructions)	
				erty identification number:	,		
					ſ		
		•	•	our entries from Part 1, including any e			\$571,000.00
Part 2: Describe	Your Vehicles						
				y vehicles, whether they are registered edule G: Executory Contracts and Unexpired		y vehicles	you own that
3. Cars, vans, tro	ucks, tractors, sp	ort utility vehicles	, motor	cycles			
■ No							
☐ Yes							

Official Form 106A/B Schedule A/B: Property page 1

D	ebtor 1	Dorso, Mic	hael J	Case number (if know	<i>(n)</i>
			otor homes, ATVs and other recreational v , motors, personal watercraft, fishing vessels		
	■ No				
	☐ Yes				
5			of the portion you own for all of your entric Part 2. Write that number here	es from Part 2, including any entries for page:	\$0.00
			sonal and Household Items		
D	o you ow	n or have any	legal or equitable interest in any of the fo	ollowing items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.		old goods and tes: Major appliar	furnishings nces, furniture, linens, china, kitchenware		dame of exemptions.
	Yes.	Describe			
			Furniture		\$1,000.00
7.	Electron Example No	es: Televisions a	and radios; audio, video, stereo, and digital eq ell phones, cameras, media players, games	uipment; computers, printers, scanners; music co	illections; electronic devices
	☐ Yes.	Describe			
8.			d figurines; paintings, prints, or other artwork; memorabilia, collectibles	books, pictures, or other art objects; stamp, coin,	or baseball card collections; other
	_	Describe			
9.	Example No	instruments	ographic, exercise, and other hobby equipmen	nt; bicycles, pool tables, golf clubs, skis; canoes a	nd kayaks; carpentry tools; musical
	☐ Yes.	Describe			
10	■ No	oles: Pistols, rifle	es, shotguns, ammunition, and related equip	pment	
	☐ Yes.	Describe			
11	. Clothe: Examp □ No		lothes, furs, leather coats, designer wear, sho	pes, accessories	
	Yes.	Describe			
			Everyday clothes		\$400.00
12	. Jewelr y Examp		ewelry, costume jewelry, engagement rings, w	redding rings, heirloom jewelry, watches, gems, go	old, silver
		Describe			
13		rm animals oles: Dogs, cats,	, birds, horses		
	☐ Yes.	Describe			
14	. Any otl	her personal ar	nd household items you did not already li	st, including any health aids you did not list	

Official Form 106A/B Schedule A/B: Property page 2

Debtor 1	Dorso, Michael J		Case number (if known)	
☐ Yes	s. Give specific information			
	I the dollar value of all of your entr t 3. Write that number here		including any entries for pages you have attached for	\$1,400.00
Part 4:	Describe Your Financial Assets			
Do you o	own or have any legal or equitable	nterest in any o	of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No	mples: Money you have in your wallet,		a safe deposit box, and on hand when you file your petition	
— 163	5		cash	\$50.00
Exam	institutions. If you have multip		certificates of deposit; shares in credit unions, brokerage hou the same institution, list each. Institution name:	ses, and other similar
	17.1. Check	king Account	Citi - joint with mother	\$500.00
	17.2. Checl	ing Account	Santanders	\$4.00
<i>Exar</i> ■ No	s, mutual funds, or publicly traded mples: Bond funds, investment accour		•	
joint	publicly traded stock and interests venture	in incorporated	and unincorporated businesses, including an interest	in an LLC, partnership, and
■ No □ Yes	s. Give specific information about the Name of ent		% of ownership:	
Nego		necks, cashiers'	e and non-negotiable instruments checks, promissory notes, and money orders. o someone by signing or delivering them.	
☐ Yes	s. Give specific information about then Issuer name			
	ement or pension accounts nples: Interests in IRA, ERISA, Keogl	n, 401(k), 403(b)	, thrift savings accounts, or other pension or profit-sharing	olans
■ Yes	s. List each account separately. Type of accoun 401(k) or Si r		Institution name: DTCC	\$27,000.00
Your			ou may continue service or use from a company utilities (electric, gas, water), telecommunications companies	, or others

☐ Yes. Institution name or individual:

Official Form 106A/B Schedule A/B: Property page 3

De	ebtor 1	Dorso, Mi	chael J	C	case number (if known)	
23.	Annuitie ■ No	es (A contract	for a periodic payment of money to you, either	for life or for a number of year	rs)	
	☐ Yes		Issuer name and description.			
24.			tion IRA, in an account in a qualified ABLE), 529A(b), and 529(b)(1).	Eprogram, or under a qualifi	ied state tuition program.	
	☐ Yes		Institution name and description. Separately f	ile the records of any interests	.11 U.S.C. § 521(c):	
25.	Trusts, e ■ No	equitable or	future interests in property (other than any	ything listed in line 1), and ri	ights or powers exercisab	le for your benefit
	☐ Yes. (Give specific	information about them			
26.			trademarks, trade secrets, and other intellomain names, websites, proceeds from royaltie			
	☐ Yes. (Give specific	information about them			
27.			s, and other general intangibles ermits, exclusive licenses, cooperative associa	ation holdings, liquor licenses,	professional licenses	
		Give specific	information about them			
M	oney or p	roperty owe	d to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refu	ınds owed to	you			
	■ No □ Yes. G	Give specific i	nformation about them, including whether you	already filed the returns and th	e tax years	
29.	Family s Example ■ No		or lump sum alimony, spousal support, child	support, maintenance, divorce	e settlement, property settle	ment
	☐ Yes. G	Give specific in	nformation			
30.	Example —	es: Unpaid w	eone owes you ages, disability insurance payments, disability l ans you made to someone else	benefits, sick pay, vacation pay	y, workers' compensation, §	Social Security benefits;
	■ No □ Yes. (Give specific	information			
31.	Example	s in insurances: Health, di	ce policies sability, or life insurance; health savings accou	nt (HSA); credit, homeowner's	s, or renter's insurance	
	■ No □ Yes. N	lame the insu	rance company of each policy and list its value) .		
			Company name:	Beneficiary	y:	Surrender or refund value:
32.	Any inte If you ar died.	erest in propreserted the benefic	erty that is due you from someone who ha iary of a living trust, expect proceeds from a life	s died e insurance policy, or are curre	ently entitled to receive prope	rty because someone has
		Give specific	information			
33.			parties, whether or not you have filed a la s, employment disputes, insurance claims, or		payment	
	☐ Yes. I	Describe eac	h claim			

Official Form 106A/B Schedule A/B: Property page 4

Del	btor 1	Dorso, Michael J		Case number (if known)	
34.	Other c	ontingent and unliquidated claims of every nature, inclu	ding counterclaims of	the debtor and rights to s	et off claims
ı	No				
[☐ Yes.	Describe each claim			
35.	Any fina	ancial assets you did not already list			
_	■ No	•			
[☐ Yes.	Give specific information			
36.		ne dollar value of all of your entries from Part 4, includin . Write that number here		-	\$27,554.00
Par	t 5: Des	scribe Any Business-Related Property You Own or Have an Inte	rest In. List any real estat	te in Part 1.	
37.	Do you o	wn or have any legal or equitable interest in any business-relat	ed property?		
	No. Go	to Part 6.			
	Yes. G	o to line 38.			
Par	t 6: Des	scribe Any Farm- and Commercial Fishing-Related Property Yo	u Own or Have an Interes	t In.	
	If yo	ou own or have an interest in farmland, list it in Part 1.			
46.	Do you	own or have any legal or equitable interest in any farm-	or commercial fishing	-related property?	
	No.	Go to Part 7.	_		
	☐ Yes.	Go to line 47.			
Par	t 7:	Describe All Property You Own or Have an Interest in That Yo	u Did Not List Above		
53.		have other property of any kind you did not already list	?		
	_ `	les: Season tickets, country club membership			
	■ No				
١	⊔ Yes. (Give specific information			
54.	Add tl	he dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
Par	t 8:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$571,000.00
56.	Part 2	: Total vehicles, line 5	\$0.00		
57.	Part 3	: Total personal and household items, line 15	\$1,400.00		
58.	Part 4	: Total financial assets, line 36	\$27,554.00		
59.	Part 5	: Total business-related property, line 45	\$0.00		
60.		: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	: Total other property not listed, line 54	+\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$28,954.00	Copy personal property to	\$28,954.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$599,954.00

Official Form 106A/B Schedule A/B: Property page 5

					_	
Fil	I in this inform	nation to identify your c	ase:			
De	btor 1	Michael J Dorso				
_	h. (0	First Name	Middle Name	Last Name	}	
	btor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Bar	nkruptcy Court for the:	EASTERN DISTRICT OF N	EW YORK, BROOKLYN DIVISION		
	se number					Check if this is an amended filing
Ot	fficial Fo	rm 106C				
			perty You Cla	nim as Exempt		4/16
orop out	perty you listed	on Schedule A/B: Proper	rty (Official Form 106A/B) as yo	ogether, both are equally responsible for sup our source, list the property that you claim as ecessary. On the top of any additional pages	s exempt. If r	nore space is needed, fill
spe app fun- to a app	cific dollar am dicable statuto ds—may be un particular dol dicable statuto	nount as exempt. Altern ory limit. Some exempti nlimited in dollar amou llar amount and the val	atively, you may claim the fu ons—such as those for heal nt. However, if you claim an ue of the property is determi	e amount of the exemption you claim. Or ull fair market value of the property bein th aids, rights to receive certain benefits exemption of 100% of fair market value to ined to exceed that amount, your exemp	g exempted s, and tax-ex under a law	up to the amount of any cempt retirement that limits the exemption
			•	n if your spouse is filing with you.		
	_	•	onbankruptcy exemptions. 11			
	☐ You are cla	iming federal exemptions	. 11 U.S.C. § 522(b)(2)			
2.				mpt, fill in the information below.		
		on of the property and line	on Current value of the portion you own	Amount of the exemption you claim	Specific lav	vs that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exemption.		
	Brief description			-		
	Line from Con	oddio 7 V D.		☐ 100% of fair market value, up to any applicable statutory limit		
3.			nption of more than \$160,375 every 3 years after that for case	es filed on or after the date of adjustment.)		
	Yes. Did)	covered by the exemption withi	in 1,215 days before you filed this case?		

Official Form 106C

Fill in this inform	nation to identify you	r case:				
Debtor 1	Michael J Dorso		Last Name			
Debtor 2	ristrano	Windle Hame	2dot Namo			
(Spouse if, filing)	First Name	Middle Name L	Last Name			
United States Bar	nkruptcy Court for the:	EASTERN DISTRICT OF NEW YO	ORK, BROO	KLYN DIVISION		
Case number						
(if known)					☐ Check	if this is an
					amend	ed filing
Official Form	n 106D					
		Who Have Claims So	ecured	hy Property	./	12/15
		f two married people are filing together, in the control of the co				
1. Do any creditors	have claims secured by	your property?				
☐ No. Check	this box and submit thi	s form to the court with your other sche	edules. You h	ave nothing else to rep	oort on this form.	
Yes. Fill in	all of the information be	elow.				
Part 1: List Al	I Secured Claims					
		nore than one secured claim, list the credito	r separately	Column A	Column B	Column C
for each claim. If me	ore than one creditor has	a particular claim, list the other creditors in cal order according to the creditor 's name.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this	Unsecured portion
2.1 Discover		Describe the property that secures the	claim:	\$1,443.00	claim \$0.00	If any \$1,443.00
Creditor's Name	•					
PO Box 7	1001	As of the date you file, the claim is: Che	eck all that			
	NC 28272-1084	apply. Contingent				
	City, State & Zip Code	☐ Unliquidated				
, , , , , , , , , , , , , , , , , , , ,	, ,	☐ Disputed				
Who owes the del	bt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only		An agreement you made (such as mor	rtgage or secu	red		
Debtor 2 only		car loan)				
Debtor 1 and De	•	☐ Statutory lien (such as tax lien, mecha	nic's lien)			
	ne debtors and another	☐ Judgment lien from a lawsuit				
Check if this cla		Other (including a right to offset)				
Date debt was incu	ırred	Last 4 digits of account number	12RI			
	e Loan Mgmt	B		\$405,335.00	\$0.00	\$405,335.00
Creditor's Name	<u> </u>	Describe the property that secures the	ciaim:	\$403,333.00	φυ.υυ	Ψ 4 05,335.00
15480 Lag	juna Canyon	A - of the data was file the plains in O	1 11 11 1			
Rd		As of the date you file, the claim is: Che apply.	ck all that			
Irvine, CA	92618-2132	☐ Contingent				
Number, Street,	City, State & Zip Code	Unliquidated				
Who owes the del	ht? Chaak ana	☐ Disputed Nature of lien. Check all that apply.				
_	bt? Check one.	☐ An agreement you made (such as more	rtanan or annu	rod		
■ Debtor 1 only		car loan)	igage or secu	ileu		
☐ Debtor 2 only ☐ Debtor 1 and De	htor 2 only	☐ Statutory lien (such as tax lien, mecha	nio's lian'			
	ector 2 only ne debtors and another	☐ Statutory lien (such as tax lien, mecha	mos nen)			
☐ Check if this cla		☐ Other (including a right to offset)				
community del						
Date debt was incu	ırred 2004-04	Last 4 digits of account number	5411			

Official Form 106D

Debtor 1 Michael J Dorso		Case number (f know)		
First Name Middle N	Name Last Name			
2.3 Santander Bank NA Creditor's Name	Describe the property that secures the claim:	\$39,916.00	\$0.00	\$39,916.00
865 Brook St				
Rocky Hill, CT 06067-3444	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secu	red		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred 2006-06	Last 4 digits of account number 7713			
2.4 Santander Bank NA	Describe the property that secures the claim:	\$39,916.00	\$0.00	\$39,916.00
Creditor's Name				
865 Brook St	As of the date you file, the claim is: Check all that			
Rocky Hill, CT	apply.			
06067-3444	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only	☐ An agreement you made (such as mortgage or secu	red		
Debtor 2 only	car loan)	100		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred 2006-06	Last 4 digits of account number 7713			
2.5 Toyota Motor Credit Co	Describe the property that secures the claim:	\$6,234.00	\$0.00	\$6,234.00
Creditor's Name Toyota Financial Services				
PO Box 8026	As of the date you file, the claim is: Check all that			
Cedar Rapids, IA	apply. Contingent			
52408-8026	<u> </u>			
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only	☐ An agreement you made (such as mortgage or secu	red		
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred 2016-09	Last 4 digits of account number 0001			
2.6 Toyota Motor Credit Co	Describe the property that secures the claim:	\$6,234.00	\$0.00	\$6,234.00
Creditor's Name		ΨΨ, Σ ΨΤΙΨΨ	Ψ0.00	<u> </u>
Toyota Financial				
Services Officia FOr Box 8026 Additiona	Dago of Schodulo De Craditora What Have Chim	e Socured by Brananty		nogo 2 of
Cedar Rapids, IA	Page of Schedule D: Creditors Who Have Claim	s secured by Property		page 2 of 3
Software 22476 160 2006-2017 CIN Group - www	.dincompass.com			

As of the date you file, the claim is: Check all that spoly. Number, Street, City, State & Zip Code Unliquidated Disputed	Debtor 1 Michael J Dorso		Case number (f know)
Contingent Unliquidated Unliqu	First Name Middle N	me Last Name	
Contingent Unliquidated Unliqu			
Contingent Unliquidated Unliqu		As of the date you file the claim in Observation	
Who owes the debt? Check one. Debtor 1 only			
Who owes the debt? Check one. Debtor 1 only			
Disputed Disputed	Number, Street, City, State & Zip Code		
Debtor 1 only			
Debtor 1 only	Who owes the debt? Check one.	•	
Debtor 2 only	■ B.1: 4 1		cured
□ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Al teast one of the debtors and another □ Check if this claim relates to a community debt Date debt was incurred 2016-09 Last 4 digits of account number 0001 Describe the property that secures the claim: 119 Woehrie Ave, Staten Island, NY 10312-1943 As of the date you file, the claim is: Check all that apply. □ Told Country Rd Ste 113 Carle Place, NY 11514-1847 Number, Street, City, State & Zip Code □ Debtor 2 only □ Debtor 1 and Debtor 3 only □ Check if this claim relates to a community debt Last 4 digits of account number □ Check if this claim relates to a community debt Last 4 digits of account number □ Check if this claim relates to a community debt Date debt was incurred □ Last 4 digits of account number □ Last 4 digits of account number □ Check if this claim relates to a community debt Date debt was incurred □ Last 4 digits of account number □ Last 4 digits of account number □ Check if this claim relates to a community debt □ Describe the property that secures the claim: \$949,078.00 Fart 2: □ List Others to Be Notified for a Debt That You Already Listed □ Set this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have others to be notified for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any of the debts in Part 1, do not fill out or submit this page. Name, Number, Street, City, State & Zip Code	_ ′		Cureu
At least one of the debtors and another community debt Date debt was incurred 2016-09 Last 4 digits of account number 0001 Describe the property that secures the claim: \$450,000.00 \$571,000.00 \$119 Woehrle Ave, Staten Island, NY 10312-1943 As of the date you file, the claim is: Check all that apply. This 14-1847 Number, Street, Chy, State & Zip Code Who owes the debt? Check one: Debtor 1 only	_ ′	_	
Check if this claim relates to a community debt Date debt was incurred 2016-09 Last 4 digits of account number 0001 2.7 Wells Fargo Bank Creditor's Name C/O Stein, Weiner & Roth, LLP 1 Old Country Rd Ste 113 Carle Place, NY 11514-1847 Number, Street, City, State & Zip Code Nature of lien. Check all that apply. Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Community debt Date debt was incurred Last 4 digits of account number 0001 Add the dollar value of your entries in Column A on this page. Write that number here: \$949,078.00 If this is the last page ofly if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1, for example, if a collection agency is trying to collect from your for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency have not be notified for any debts in Part 1, do not fill out or submit this page. Name, Number, Street, City, State & Zip Code On which line in Part 1 idd you enter the creditor? 2.1			
Date debt was incurred 2016-09 Last 4 digits of account number 0001 2.7 Wells Fargo Bank Creditor's Name c/o Stein, Weiner & Roth, LLP 1 Old Country Rd Ste 113 Carle Place, NY 11514-1847 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only An agreement you made (such as mortgage or secured carl loan) Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Add the dollar value of your entries in Column A on this page. Write that number here: \$949,078.00 If this is the last page of your form, add the dollar value totals from all pages. Write that number here: \$949,078.00 Some of the debt to a possible of the collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you user the creditor? Name, Number, Street, City, State & Zip Code On which line in Part 1 did you enter the creditor? 2.1	At least one of the debtors and another	☐ Judgment lien from a lawsuit	
Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 1 and Debtor 5 only Debtor 1 and Debtor 6 only Debtor 1 and Debtor 6 only Debtor 1 and Debtor 7 only Debtor 1 and Debtor 8 only 1		Other (including a right to offset)	
Creditor's Name c/o Stein, Weiner & Roth, LLP 1 Old Country Rd Ste 113 Carle Place, NY 11514-1847 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Check if this claim relates to a community debt Date debt was incurred Add the dollar value of your entries in Column A on this page. Write that number here: Sp49,078.00 If this is the last page of your form, add the dollar value totals from all pages. Part 2: List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. Name, Number, Street, City, State & Zip Code Tending Time Ave, Staten Island, NY 10312-1943 As of the date you file, the claim is: Check all that apply. Contingent Last of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that appl	Date debt was incurred 2016-09	Last 4 digits of account number 0001	
Creditor's Name c/o Stein, Weiner & Roth, LLP 1 Old Country Rd Ste 113 Carle Place, NY 11514-1847 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Check if this claim relates to a community debt Date debt was incurred Add the dollar value of your entries in Column A on this page. Write that number here: Sp49,078.00 If this is the last page of your form, add the dollar value totals from all pages. Part 2: List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. Name, Number, Street, City, State & Zip Code Tending Time Ave, Staten Island, NY 10312-1943 As of the date you file, the claim is: Check all that apply. Contingent Last of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that appl	2.7 Wells Fargo Bank	Describe the property that secures the claim:	\$450,000.00 \$571,000.00 \$0.00
C/o Stein, Weiner & Roth, LLP 1 Olid Country Rd Ste 113 Carle Place, NY 11514-1847 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Add the dollar value of your entries in Column A on this page. Write that number here: Sy49,078.00 Fart2: List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. Name, Number, Street, City, State & Zip Code As of the date you file, the claim is: Check all that papply. As of the date you file, the claim is: Check all that papply. As of the date you file, the claim is: Check all that that papply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that that papply. As of the date you file, the claim is: Check all that that papply. As of the date you file, the claim is: Check all that apply. As of the debts that pour bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts		119 Woehrle Ave. Staten Island, NY	
Tolid Country Rd Ste 113 Carle Place, NY 11514-1847 Number, Street, City, State & Zip Code Unliquidated Disputed			
Carle Place, NY 11514-1847 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 of the debtors and another Check iff this claim relates to a community debt Date debt was incurred Last 4 digits of account number Add the dollar value of your entries in Column A on this page. Write that number here: \$949,078.00 If this is the last page of your form, add the dollar value totals from all pages. Write that number here: \$949,078.00 If this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have not fill out or submit this page. Name, Number, Street, City, State & Zip Code On which line in Part 1 did you enter the creditor? 2.1		As of the date you file, the claim is: Check all that	
11514-1847			
Number, Street, City, State & Zip Code		☐ Contingent	
Who owes the debt? Check one. Disputed Nature of lien. Check all that apply. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Add the dollar value of your entries in Column A on this page. Write that number here: Sp49,078.00 If this is the last page of your form, add the dollar value totals from all pages. Write that number here: List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. Name, Number, Street, City, State & Zip Code On which line in Part 1 did you enter the creditor? 2.1		☐ Unliquidated	
Who owes the debt? Check one. Debtor 1 only	Hambol, Glock, Oily, State & Zip Code	`	
Debtor 1 only	Who owes the debt? Check one	•	
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Check if this claim relates to a community debt Date debt was incurred □ Last 4 digits of account number Add the dollar value of your entries in Column A on this page. Write that number here: \$949,078.00 If this is the last page of your form, add the dollar value totals from all pages. Write that number here: \$949,078.00 Part 2: List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. Name, Number, Street, City, State & Zip Code On which line in Part 1 did you enter the creditor? 2.1	_		
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Add the dollar value of your entries in Column A on this page. Write that number here: \$949,078.00 If this is the last page of your form, add the dollar value totals from all pages. Write that number here: \$949,078.00 Part 2: List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. Name, Number, Street, City, State & Zip Code On which line in Part 1 did you enter the creditor? 2.1	_ ′		curea
At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Add the dollar value of your entries in Column A on this page. Write that number here: \$949,078.00 If this is the last page of your form, add the dollar value totals from all pages. Write that number here: \$949,078.00 Part 2: List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. Name, Number, Street, City, State & Zip Code On which line in Part 1 did you enter the creditor? 2.1		_	
Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Add the dollar value of your entries in Column A on this page. Write that number here: \$949,078.00 If this is the last page of your form, add the dollar value totals from all pages. Write that number here: \$949,078.00 Part 2: List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. Name, Number, Street, City, State & Zip Code On which line in Part 1 did you enter the creditor? 2.1	☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)	
Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. Write that number here: \$949,078.00 \$949,078.00 Part 2: List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. Name, Number, Street, City, State & Zip Code On which line in Part 1 did you enter the creditor? 2.1	☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit	
Add the dollar value of your entries in Column A on this page. Write that number here: \$949,078.00 If this is the last page of your form, add the dollar value totals from all pages. Write that number here: \$949,078.00 \$949,078.00 Part 2: List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. Name, Number, Street, City, State & Zip Code On which line in Part 1 did you enter the creditor? 2.1		Other (including a right to offset)	
If this is the last page of your form, add the dollar value totals from all pages. Write that number here: \$949,078.00 Part 2: List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. Name, Number, Street, City, State & Zip Code On which line in Part 1 did you enter the creditor? 2.1	Date debt was incurred	Last 4 digits of account number	
If this is the last page of your form, add the dollar value totals from all pages. Write that number here: \$949,078.00 Part 2: List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. Name, Number, Street, City, State & Zip Code On which line in Part 1 did you enter the creditor? 2.1			
Write that number here: \$949,078.00 Part 2: List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. Name, Number, Street, City, State & Zip Code On which line in Part 1 did you enter the creditor? 2.1	Add the dollar value of your entries in Col	mn A on this page. Write that number here:	\$949,078.00
Part 2: List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. Name, Number, Street, City, State & Zip Code On which line in Part 1 did you enter the creditor? 2.1		dollar value totals from all pages.	\$949.078.00
Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. Name, Number, Street, City, State & Zip Code On which line in Part 1 did you enter the creditor? 2.1	Write that number here:		\$349,070.00
trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. Name, Number, Street, City, State & Zip Code On which line in Part 1 did you enter the creditor? 2.1	Part 2: List Others to Be Notified for	a Debt That You Already Listed	
	trying to collect from you for a debt you of than one creditor for any of the debts that	ve to someone else, list the creditor in Part 1, and the you listed in Part 1, list the additional creditors here	hen list the collection agency here. Similarly, if you have more
	Namo Number Street City State 9	in Code	
			ich line in Part 1 did you enter the creditor?
Last 4 digits of account number 12RI		Last 4	digits of account number <u>12RI</u>
Name, Number, Street, City, State & Zip Code On which line in Part 1 did you enter the creditor? 2.5	Name, Number, Street, City, State & 7	ip Code On wh	ich line in Part 1 did you enter the creditor? 2.5
Toyota Motor Credit			· —
4 Gatehall Dr Ste 350 Last 4 digits of account number		Last 4	digits of account number _0001_
Name, Number, Street, City, State & Zip Code On which line in Part 1 did you enter the creditor? 2.6	Name, Number, Street, City, State & 7	ip Code On whi	ich line in Part 1 did you enter the creditor? 2.6
Toyota Motor Credit		G.,	
4 Gatehall Dr Ste 350 Parsippany, NJ 07054-4522 Last 4 digits of account number		Last 4	digits of account number

Official Form 106D

illi	n this inforn	nation to identify your	case:					
Debt	tor 1	Michael J Dorso						
		First Name	Middle Na	ame	Last Name			
	tor 2	First Name	Middle Ne		Loot Name			
(Spou	se if, filing)	First Name	Middle Na	ame	Last Name			
Unite	ed States Ba	nkruptcy Court for the:	EASTERN D	ISTRICT OF NE	W YORK, BRO	OOKLYN DIVISION		
Case	e number							
(if kno	_			_				Check if this is an
								amended filing
⊃ff;	cial Earn	n 106E/F						
		:/F: Creditors W	lha Hava	Uncopura	d Claima			12/15
						Part 2 for creditors with NONF	DIODITY I	
e Cre	editors Who Hontinuation Panumber (if known	lave Claims Secured by Prage to this page. If you ha	operty. If more ve no information	space is needed, on to report in a Pa	copy the Part yo	any creditors with partially se ou need, fill it out, number the lat Part. On the top of any add	entries in th	e boxes on the left. Attach
		ors have priority unsecure						
_	No. Go to P		u ciaiilis agailis	t you:				
	■ No. Go to F □ Yes.	art 2.						
		II of Your NONPRIORIT	Y Unsecured (Claims				
		ors have nonpriority unsec						
	_ •	ve nothing to report in this p	_	•	h vour other ache	dulos		
		ve nothing to report in this p	art. Submit tills it	on to the court with	ii your other scrie	aules.		
	Yes.							
t	ınsecured clair	m, list the creditor separately	for each claim.	For each claim liste	d, identify what t	holds each claim. If a credito ype of claim it is. Do not list clai three nonpriority unsecured cla	ms already in	cluded in Part 1. If more
-								Total claim
4.1	Capital	One		Last 4 digits of ac	count number	9994		\$777.00
	Nonpriority	Creditor's Name		_				
	Attn: G		21/	When was the del	bt incurred?	2015-04		_
	PO Box	oondence/Bankrupto : 30285	Ly					
		ke City, UT 84130-02	285					
		treet City State ZIp Code		As of the date you	u file, the claim	is: Check all that apply		
	_	rred the debt? Check one.		_				
	■ Debtor	,		Contingent				
	☐ Debtor	•		Unliquidated				
		1 and Debtor 2 only		Disputed				
		t one of the debtors and and		Type of NONPRIO	KIIY unsecure	d claim:		
	∐ Check debt	if this claim is for a com	munity	_	sing out of a sees	aration agreement or divorce that	at vou did nat	
		m subject to offset?		report as priority cla		nanon agreement or divorce tha	at you did fiot	
	■ No			☐ Debts to pension	on or profit-sharin	g plans, and other similar debts	5	
	☐ Yes			Other. Specify	Revolvina	account		
				— Outlot. Opeolly				_

Debtor	1 Dorso, Michael J		Case number (f know)			
4.2	Citi Bank Nonpriority Creditor's Name	Last 4 digits of account number	0958	\$2,262.00		
	Nonpriority Creditor's Name	When was the debt incurred?				
	PO Box 183113 Columbus, OH 43218-3113 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Type of NONPRIORITY unsecured Student loans				
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	■ Other. Specify TaxLienSta	te account opened 7/19/2016			
4.3	Citibank	Last 4 digits of account number	7004	\$1,181.00		
	Nonpriority Creditor's Name Centralized Bk/Citicorp Credit Srvs PO Box 790040 Saint Louis, MO 63179-0040	When was the debt incurred?	1997-10			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Revolving	account			
4.4	Citibank Nonpriority Creditor's Name	Last 4 digits of account number	7004	\$1,181.00		
	Centralized Bk/Citicorp Credit Srvs PO Box 790040 Saint Louis, MO 63179-0040	When was the debt incurred?	1997-10			
	Number Street City State ZIp Code Who incurred the debt? Check one. As of the date you file, the clair		s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	■ Other. Specify Revolving				

Debto	T 1 Dorso, Michael J	Case number (f know)	
4.5	Discover	Last 4 digits of account number 12RI	\$5,487.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 71084 Charlotte, NC 28272-1084 Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Judgment account opened 8/28/2013	
4.6	Discover Nonpriority Creditor's Name	Last 4 digits of account number	\$9,974.00
	Nonphonty Creditor's Name	When was the debt incurred?	
	PO Box 71084 Charlotte, NC 28272-1084 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Judgment account opened 8/9/2011	
4.7	Kohls/Capital One Nonpriority Creditor's Name	Last 4 digits of account number 9491	\$289.00
	Kohls Credit PO Box 3043	When was the debt incurred? 2016-11	
	Milwaukee, WI 53201-3043 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Revolving account	

Debto	or 1 Dorso, Michael J		Case number (f know)					
4.8	Laboratory Corp of America Nonpriority Creditor's Name	Last 4 digits of account number	9340	\$82.00				
		When was the debt incurred?	2017-02-19					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not					
	No	Debts to pension or profit-sharir	ng plans, and other similar debts					
	☐ Yes	■ Other. Specify Open acco	unt					
4.9	MCCORMACK MD Nonpriority Creditor's Name	Last 4 digits of account number	6710	\$280.00				
	Nonpholity Creditor's Name	When was the debt incurred?	2015-10					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	Debtor 1 and Debtor 2 only							
	☐ At least one of the debtors and another							
	☐ Check if this claim is for a community							
	debt Is the claim subject to offset?							
	No	□ Debts to pension or profit-sharing plans, and other similar debts						
	Yes	Other Specify Open acco						
4.10	Visa Dept Store National Bank/Macy's Nonpriority Creditor's Name	Last 4 digits of account number	5750	\$1,282.00				
	Attn: Bankruptcy PO Box 8053	When was the debt incurred?	1993-07-17					
	Mason, OH 45040-8053							
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply					
	Who incurred the debt? Check one.							
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community debt	Student loans						
	Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	☐ Yes	Other Specify Revolving	account					

Debtor 1	Dorso, Michael J		Case number (f know)	
4.11	Visa Dept Store National Bank/Macy's	Last 4 digits of account number	5750	\$1,282.00
	Nonpriority Creditor's Name Attn: Bankruptcy PO Box 8053	When was the debt incurred?	1993-07-17	_
_	Mason, OH 45040-8053 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharir	an plane and other similar debte	
	■ No	' '		
	Yes	■ Other. Specify Revolving	account	_
D(O	Elist Others to Be Notified Alexate Bal	La Than Mara Alexa de L'ana d		
is tryin have m notifie	List Others to Be Notified About a Dels page only if you have others to be notified g to collect from you for a debt you owe to shore than one creditor for any of the debts that d for any debts in Parts 1 or 2, do not fill out of the collection.	about your bankruptcy, for a debt that y omeone else, list the original creditor in at you listed in Parts 1 or 2, list the addi or submit this page.	Parts 1 or 2, then list the collection agency tional creditors here. If you do not have add	here. Similarly, if you
Name an Amca	d Address	On which entry in Part 1 or Part 2 did you Line 4.8 of (<i>Check one</i>):	llist the original creditor? Part 1: Creditors with Priority Unsecured Cla	iims
	Saw MI		Part 2: Creditors with Nonpriority Unsecured	
Elmsfo	ord, NY 10523			Cialitis
		Last 4 digits of account number	9340	
	d Address If Colorado LLC	_	Part 1: Creditors with Priority Unsecured Cla	
		Last 4 digits of account number	Part 2: Creditors with Nonpriority Unsecured 12RI	Claims
Capita 15000	^{d Address} I One Capital One Dr ond, VA 23238-1119	` ′	list the original creditor? Part 1: Creditors with Priority Unsecured Cla Part 2: Creditors with Nonpriority Unsecured	
	ona, 171 20200 1110	Last 4 digits of account number	9994	
Citibar 1000 T	d Address nkna echnology Dr on, MO 63368-2239		list the original creditor? Part 1: Creditors with Priority Unsecured Cla Part 2: Creditors with Nonpriority Unsecured	
•	,e cocce ==cc	Last 4 digits of account number	7004	
Citibar 1000 T	d Address nkna echnology Dr on, MO 63368-2239		I list the original creditor? Part 1: Creditors with Priority Unsecured Cla Part 2: Creditors with Nonpriority Unsecured 7004	
NI-	al Andreas	On which care is Bout a Bout a Bout		
	d Address ver Bank		list the original creditor? Part 1: Creditors with Priority Unsecured Cla Part 2: Creditors with Nonpriority Unsecured	
		Last 4 digits of account number	Part 2: Creditors with Nonpriority Unsecured 11RI	i Ciaiffis
Dsnb I PO Bo	x 8218		list the original creditor? Part 1: Creditors with Priority Unsecured Cla Part 2: Creditors with Nonpriority Unsecured	
Mason	, OH 45040-8218	Last 4 digits of account number	5750	

Debtor 1 Dorso, Michael J		Case number (f know)			
Name and Address Dsnb Macys PO Box 8218	On which entry in Part 1 or Part 2 did Line 4.11 of (Check one):	Part 1: Creditors with Priority Unsecured Claims			
Mason, OH 45040-8218	Last 4 digits of account number	■ Part 2: Creditors with Nonpriority Unsecured Claims 5750			
Name and Address Kohls/capone N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051	On which entry in Part 1 or Part 2 did Line 4.7 of (<i>Check one</i>):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
,	Last 4 digits of account number	9491			
Name and Address Sa-Vit Collection Agen 46 W Ferris St East Brunswick, NJ 08816-2159	On which entry in Part 1 or Part 2 did Line 4.9 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims			
	Last 4 digits of account number	6710			
Name and Address State of New York	On which entry in Part 1 or Part 2 did Line 4.2 of (<i>Check one</i>): Last 4 digits of account number	you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims 0958			

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	¢	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	Ψ	
	oc.	Ciains for death of personal injury write you were intoxicated	oc.	»	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					<u>.</u>
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	24,077.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	24.077.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Michael J Dorso			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK, BROOKLYN DIVIS	ION
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person o	r company with Name, Number	whom you have the	e contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3	o.i.y		<u> </u>		
	Name				_
	Number	Street			_
	-0.1		01.1	710.0	_
2.4	City		State	ZIP Code	
2.7	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					_
	Name				
	Ni unala a -	Ctroot			_
	Number	Street			
	City		State	ZIP Code	-

Official Form 106G

Fill in this i	nformation to identify your	case:			
Debtor 1	Michael J Dorso	Middle Name	Last Name		
Debtor 2	First Name	Middle Name	Last Name	ĺ	
(Spouse if, filing	g) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK, BROOK	LYN DIVISION	
Case numb	er				
(if known)					Check if this is an amended filing
Official	Form 106H				
	ule H: Your Cod	ebtors			12/15
and number case number		the left. Attach the Additi question.	onal Page to this page	. On the top of any Ado	opy the Additional Page, fill it out, ditional Pages, write your name and
■ No					
■ No □ Yes					
	in the last 8 years, have yοι nia, Idaho, Louisiana, Nevada				states and territories include Arizona,
■ No. (Go to line 3.				
_	Did your spouse, former spou	se, or legal equivalent live w	ith you at the time?		
line 2 a	igain as a codebtor only if th Schedule E/F (Official Form	nat person is a guarantor	or cosigner. Make sure	you have listed the c	with you. List the person shown in reditor on Schedule D (Official Forn le E/F, or Schedule G to fill out
	Column 1: Your codebtor ame, Number, Street, City, State and 2	ZIP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D. lin	Δ
	Name			_ ☐ Schedule E/F,	·
				☐ Schedule G, lin	
	Number Street			_	
	City	State	ZIP Code		
3.2				☐ Schedule D, lin	e
	lame			□ Schedule E/F,	
				☐ Schedule G, lin	
	Number Street	Stata	ZIP Code	_	
C	City	State	ZIP Code		

Official Form 106H Software Copyright (c) 1996-2017 CIN Group - www.cincompass.com Schedule H: Your Codebtors Page 1 of 1

Fill	in this information to identify your ca	se:							
Del	otor 1 Michael J Do	orso			_				
	otor 2 use, if filing)				_				
Uni	ted States Bankruptcy Court for the:	EASTERN DISTRICT DIVISION	OF NEW YORK, E	ROOKLYN	_				
	se number 		-			eck if this is: An amende A suppleme	d filing ent showing	g postpetition o	chapter 13
0	fficial Form 106I					MM / DD/ Y		3	
S	chedule I: Your Inco	ome							12/15
sup spo atta	s complete and accurate as possiplying correct information. If you asse. If you are separated and your ch a separate sheet to this form. On the complete the comp	are married and not filin spouse is not filing wit	g jointly, and you h you, do not incl	spouse is lude informa	living with	n you, includ t your spou	le informa se. If more	ation about you space is ne	our eded,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-fil	ling spouse	
	If you have more than one job,	Employment status	■ Employed			☐ Employed			
	attach a separate page with information about additional employers.	Occupation	☐ Not employed			☐ Not employed			
	Include part-time, seasonal, or self-employed work.	Employer's name	DTCC						
	Occupation may include student o homemaker, if it applies.	FEMPLOYER'S address	55 Water St New York, NY	10041-00	04				
		How long employed th	nere?						
Par	Give Details About Mon	thly Income							
	mate monthly income as of the da ss you are separated.	te you file this form. If y	ou have nothing to r	eport for any	line, write	\$0 in the spa	ace. Includ	e your non-filir	ng spouse
•	u or your non-filing spouse have more e, attach a separate sheet to this forr		oine the information	for all emplo	yers for tha	at person on	the lines be	elow. If you ne	ed more
					For D	Debtor 1		btor 2 or ng spouse	
2.	List monthly gross wages, salar deductions). If not paid monthly, ca			2.	\$	5,666.12	\$	N/A	
3.	Estimate and list monthly overti	me pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add line	e 2 + line 3.		4.	\$5,	666.12	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Dorso, Michael J	_	Cas	se number (if known)		
	Cor	by line 4 here	4.	F:	or Debtor 1 5,666.12		Debtor 2 or Filing spouse N/A
_		-		*	3,000.12	. *	
5.		all payroll deductions:	_	•		•	
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$ \$	1,767.03	- \$	N/A
	5b. 5c.	Mandatory contributions for retirement plans	5b. 5c.		127.83	- \$	N/A
	5d.	Voluntary contributions for retirement plans Required repayments of retirement fund loans	5d.		296.83	-	N/A
	5u. 5e.	Insurance	5u. 5e.		0.00 145.17	- \$	N/A N/A
	5f.	Domestic support obligations	56. 5f.	\$	0.00	- <u>\$</u> —	N/A N/A
	5g.	Union dues	5g.	*	0.00	- \$-	N/A
	5h.	Other deductions. Specify:	5h.		0.00	· · —	N/A
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.	\$	2,336.86		N/A
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	·		
			7.	Ψ	3,329.26	- Ψ	N/A
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A
	8b.	Interest and dividends	8b.		0.00		N/A
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			0.00	-	N/A
	8d.	Unemployment compensation	8d.	\$	0.00	- \$	N/A
	8e.	Social Security	8e.	\$	0.00	\$ <u></u>	N/A
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	- <u></u> \$	N/A
	8g.	Pension or retirement income	— 8g.		0.00	-	N/A
	8h.	Other monthly income. Specify:	8h.		0.00		N/A
			_		0.00	; <u> </u>	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	0.00	\$	N/A
10	Cal	culate monthly income. Add line 7 + line 9.	10.	<u> </u>	3,329.26 + \$		N/A = \$ 3,329.26
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			3,323.20		10/4 - 0,525.20
11.	Incli othe Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your der friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not avoiry:	epende		•		le J. 11. +\$ 0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certain					Combined
13	Do	you expect an increase or decrease within the year after you file this form	?				monthly income
١٥.	=	No.					
		Yes. Explain:					

Official Form 106I Schedule I: Your Income page 2

Fill	in this information to identify you	ur case:					
Deb	otor 1 Michael J Do	rso			Chec	k if this is:	
D-1				_	_	An amended filing	
	otor 2 ouse, if filing)					A supplement show expenses as of the f	ing postpetition chapter 13 following date:
Unit	ted States Bankruptcy Court for the:		N DISTRICT OF NEW YO YN DIVISION	DRK,	Ī	MM / DD / YYYY	
	se number nown)						
0	fficial Form 106J						
S	chedule J: Your E	Expens	ses				12/15
info (if k	as complete and accurate as pormation. If more space is neeknown). Answer every question to be	ded, attach n.					
1.	Is this a joint case?						
	■ No. Go to line 2. □ Yes. Does Debtor 2 live ir	n a separate	e household?				
	☐ No ☐ Yes. Debtor 2 mus	t file Official	Form 106J-2, Expenses for	or Separate Househo	oldof Debtor	2.	
2.	Do you have dependents?	■ No					
	Do not list Debtor 1 and Debtor 2.		Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state the dependents names.						☐ No ☐ Yes ☐ No
3.	Do your expenses include expenses of people other th yourself and your dependen	nts? ⊔∖	es				☐ Yes
Est exp	t 2: Estimate Your Ongoin cimate your expenses as of your enses as of a date after the backlicable date.	ur bankrup	tcy filing date unless yo				
val	lude expenses paid for with nouse of such assistance and havificial Form 106I.)	•	-			Your expo	enses
4.	The rental or home ownersh payments and any rent for the			clude first mortgage	4. \$		2,200.00
	If not included in line 4:						
	4a. Real estate taxes				4a. \$		0.00
	4b. Property, homeowner's,	or renter's i	nsurance		4b. \$		0.00
	4c. Home maintenance, rep				4c. \$		0.00
_	4d. Homeowner's association				4d. \$		0.00
5.	Additional mortgage payme	nts for you	r residence, such as hom	e equity loans	5. \$		0.00

Debtor 1	Dorso, Michael J	Case number (if known)	
6. Uti l	lities:		
6a.	Electricity, heat, natural gas	6a. \$	450.00
6b.	Water, sewer, garbage collection	6b. \$	100.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. \$	200.00
6d.	Other. Specify:	6d. \$	0.00
Foo	od and housekeeping supplies	7. \$	1,000.00
Chi	ildcare and children's education costs	8. \$	0.00
Clo	othing, laundry, and dry cleaning	9. \$	500.00
	rsonal care products and services	10. \$	100.00
. Me	dical and dental expenses	11. \$	150.00
	ansportation. Include gas, maintenance, bus or train fare.	·	
	not include car payments.	12. \$	250.00
	tertainment, clubs, recreation, newspapers, magazines, and books	13. \$	150.00
. Ch	aritable contributions and religious donations	14. \$	40.00
. Ins	urance.		
Do	not include insurance deducted from your pay or included in lines 4 or 20.		
15a	a. Life insurance	15a. \$	75.00
15b	b. Health insurance	15b. \$	0.00
150	c. Vehicle insurance	15c. \$	220.00
150	d. Other insurance. Specify:	15d. \$	0.00
. Tax	xes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
	ecify:	16. \$	0.00
	tallment or lease payments:	•	
	a. Car payments for Vehicle 1	17a. \$	0.00
17b	c. Car payments for Vehicle 2	17b. \$	0.00
17c	c. Other. Specify:	17c. \$	0.00
170	d. Other. Specify:	17d. \$	0.00
	ur payments of alimony, maintenance, and support that you did not repo		0.00
	ducted from your pay on line 5, Schedule I, Your Income (Official Form 10		
	ner payments you make to support others who do not live with you.	\$	0.00
	ecify:	19.	
	ner real property expenses not included in lines 4 or 5 of this form or on a. Mortgages on other property	Schedule I: Your Income. 20a. \$	0.00
		·	0.00
	b. Real estate taxes	20b. \$	0.00
	c. Property, homeowner's, or renter's insurance	20c. \$	0.00
	d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
	e. Homeowner's association or condominium dues	20e. \$	0.00
. Oth	ner: Specify:	21. +\$	0.00
2. Cal	Iculate your monthly expenses		
228	a. Add lines 4 through 21.	\$	5,435.00
22b	o. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 100	6J-2 \$	
	c. Add line 22a and 22b. The result is your monthly expenses.	\$	5,435.00
			3,733.00
	Iculate your monthly net income.		
	a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	3,329.26
23b	c. Copy your monthly expenses from line 22c above.	23b\$	5,435.00
00-	Cubirot vous monthly our once from the control of		
230	 Subtract your monthly expenses from your monthly income. The result is your monthly net income. 	23c. \$	-2,105.74
	you expect an increase or decrease in your expenses within the year aft		
	example, do you expect to finish paying for your car loan within the year or do you expe	ect your mortgage payment to increase	e or decrease because of a
_	dification to the terms of your mortgage?		
	No.		
	Yes. Explain here:		

Fill in this into	ormation to identify your	case:				
Debtor 1	Michael J Dorso				(
	First Name	Middle Name	Las	t Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	l ac	t Name		
(Opouse II, IIIIIg)	1 list Name	Wildale Name	Lac	rivanie	j	
United States	Bankruptcy Court for the:	EASTERN DISTRICT (OF NEW YOR	RK, BROOKLYN DIVISION	<u> </u>	
Case number						
(if known)	-					1 Check if this is an
					_	amended filing
~ <u>-</u>						
Official Fo	<u>rm 106Dec</u>					
Declara	ation About a	an Individua	I Debt	or's Schedu	les	12/15
If two married	people are filing together	, both are equally respor	nsible for su	oplying correct informati	ion.	
Vou must file t	his form whenever you fi	la hankruntov echodulas	or amondo	schodulos Making a fal	lea statament con	coaling property or
	ey or property by fraud in					
	. 18 U.S.C. §§ 152, 1341, 1			·	•	·
0	ton Balana					
S	ign Below					
D:-		ana wha ia NOT an attan				
Dia you	pay or agree to pay some	one who is NOT an attor	ney to neip y	ou fill out bankruptcy to	orms?	
■ No						
110						
☐ Yes.	Name of person					etition Preparer's Notice,
				D	eciaration, and Sign	nature (Official Form 119)
	nalty of perjury, I declare	that I have read the sum	mary and sc	hedules filed with this de	eclaration and	
that they	are true and correct.					
X /s/ M	ichael J Dorso		Х			
	ael J Dorso			Signature of Debtor 2		
Signa	ture of Debtor 1					
Date	November 7, 2017			Date		
Date	November 1, 2017					

Fill	in this informa	tion to identify your o	ase:			
Del	otor 1	Michael J Dorso First Name	Middle Name	Last Name		
Del	otor 2	FIIST Name	Middle Name	Last Name		
(Spc	ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Bank	ruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK, BROOKLYN DIVISION		
Cas	se number					
(if kr	nown)				_	Check if this is an
					а	mended filing
	–	1000				
		<u>m 106Sum</u>				
				nd Certain Statistical Information		12/15
				re filing together, both are equally responsible fo information on this form. If you are filing amend		
				the box at the top of this page.		•
Par	t 1: Summar	ize Your Assets				
					Yo	our assets
					Va	alue of what you own
1.		8: Property (Official Fo			\$	571,000.00
			-		\$	28,954.00
	1c. Copy line	63, Total of all property	on Schedule A/B		\$	599,954.00
Par	t 2: Summar	ize Your Liabilities				
					Yo	our liabilities
					An	mount you owe
2.			nims Secured by Property (\$	949,078.00
		•		e bottom of the last page of Part 1 of Schedule D	Ψ	040,010.00
3.			Insecured Claims (Official I (priority unsecured claims	Form 106E/F) s) from line 6e &chedule E/F	\$	0.00
	.,		" ,	aims) from line 6j &chedule E/F	\$	24,077.00
			(,			24,017100
				Your total liabilitie	s \$	973,155.00
Par	t 3: Summar	ize Your Income and	Expenses			
4.	Schedule I: Yo	our Income(Official For	m 106l)			
					\$	3,329.26
5.		<i>four Expenses</i> (Official nthly expenses from line	,		\$	5,435.00
Par	t 4: Answer	These Questions for A	Administrative and Statis	tical Records		
6.		• •	r Chapters 7, 11, or 13? n this part of the form. Che	ck this box and submit this form to the court with your	other sc	hedules.
7.	YesWhat kind of	debt do you have?				
	■ Your del	bts are primarily cons	umer debts. Consumer de	ebts are those "incurred by an individual primarily for a	persons	al. family, or household
				cal purposes. 28 U.S.C§ 159.	P0.00.10	,

☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Debtor 1 Dorso, Michael J Case number (if known)

8. **From the** Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____5,666.12

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Ell	l in this infor	mation to identify you	r case:			
De	ebtor 1	Michael J Dorso	Middle Name	Last Name		
1 -	ebtor 2 oouse if, filing)	First Name	Middle Name	Last Name		
` `				NEW YORK, BROOKLYN D	IVISION	
Un	lited States B	ankruptcy Court for the:	EASTERN DISTRICT OF	NEW YORK, BROOKLYN D	TVISION	
	ase number known)				-	Check if this is an amended filing
Oi	fficial Fo	orm 107				
			Affairs for Individ	duals Filing for B	ankruptcy	4/10
info (if k	ormation. If it known). Answ	more space is needed, wer every question.	attach a separate sheet to the	nis form. On the top of any a	qually responsible for supply additional pages, write your	
Pa	rt 1: Give	Details About Your Ma	arital Status and Where You	Lived Before		
1.	What is you	ur current marital statu	is?			
	☐ Marrie	-				
	☐ Not ma	arried				
2.	During the	last 3 years, have you	lived anywhere other than w	where you live now?		
	■ No □ Yes. Li	ist all of the places you liv	ved in the last 3 years. Do not i	nclude where you live now.		
	Debtor 1 F	Prior Address:	Dates Debtor 1 there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. stat	tes and territo	<i>ri</i> es include Arizona, Cal		ada, New Mexico, Puerto Ric	y property state or territory? co, Texas, Washington and Wi	
Pa	rt 2 Expla	ain the Sources of You	r Income			
4.	Fill in the to	tal amount of income yo	nployment or from operating ru received from all jobs and a nave income that you receive to	II businesses, including part-		lar years?
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		1 of current year until ed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$48,412.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	
	or last calend anuary 1 to D	ar year: December 31, 2016)	■ Wages, commissions, bonuses, tips	\$57,135.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	
Offic	cial Form 107		Statement of Financial Aff	airs for Individuals Filing for B	ankruptcy	page

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Del	otor 1	Dor	so, Micha	ael J			Ca	ase number (if known)		
				I	Debtor 1			Debtor 2		
					Sources of income Check all that apply.		income deductions and ons)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
5.	Include other p	e inco oublic	me regardle benefit pay	ess of whether t ments; pension:	uring this year or the tw hat income is taxable. Exa s; rental income; interest; o income that you received t	mples of <i>oth</i> dividends; m	ner income are ali noney collected fro	mony; child support; om lawsuits; royalties		
	List ea	ch so	urce and th	e gross income	from each source separat	tely. Do not i	nclude income th	at you listed in line 4.		
	■ N	lo								
	_		ll in the de	tails.						
					ebtor 1			Debtor 2		
					Sources of income Describe below.	each s	deductions and	Sources of inc Describe below.		Gross income (before deductions and exclusions)
Par	t 3:	List (ertain Pay	yments You Ma	ade Before You Filed for	Bankrupto	у			
	■ Y	i l	ndividual p During the t No. Yes * Subject t	rimarily for a per 90 days before 90	tor 2 has primarily constronal, family, or household you filed for bankruptcy, dish creditor to whom you paint include payments for don attorney for this bankrup 4/01/19 and every 3 years outh have primarily constronal for bankruptcy, dish creditor to whom you paint domestic support obligation y case.	d purpose." d you pay ar id a total of \$ omestic sup toy case. s after that for umer debts d you pay ar id a total of \$ ns, such as	ny creditor a total of 66,425* or more in port obligations, for cases filed on one of the control of the contro	of \$6,425* or more? In one or more paymer such as child support or after the date of add of \$600 or more?	nts and the to t and alimon justment. paid that cre t include pay	otal amount you paid that y. Also, do not include ditor. Do not include
	Creai	itor's	name and	Address	Dates of paym	ient	paid	still owe	was this p	payment for
7.	Insider which y busines	rs incl you ai ess you	ude your re e an office u operate a	elatives; any gen r, director, perso s a sole propriet	nkruptcy, did you make eral partners; relatives of a on in control, or owner of 2 or. 11 U.S.C. § 101. Include	any general p 0% or more	partners; partners of their voting sec	hips of which you are curities; and any man	a general pa aging agent,	artner; corporations of including one for a
			. ,	ents to an inside			T-1-1	A	D (.	41. 1
	Inside	er's N	ame and A	Address	Dates of paym	nent	Total amount paid	Amount you still owe	Reason to	or this payment
8.	inside Include	r? e payr		•	nkruptcy, did you make or cosigned by an insider.		ents or transfer a	any property on acc	ount of a d	ebt that benefited an
	_	lo 'es. Li	st all payme	ents to an inside	er					
			ame and A		Dates of paym	nent	Total amount	Amount you		or this payment

Case 1-17-45950-cec Doc 1 Filed 11/07/17 Entered 11/07/17 17:10:02

Del	btor 1 D	orso, Michael J	Case number (if known)						
Pai	rt 4: Ide	entify Legal Actions, Repossessions	s and Foreclosures						
9.	Within 1 List all su	year before you filed for bankruptc ich matters, including personal injury cat disputes.	y, were you a party in any						
	□ No ■ Yes	. Fill in the details.							
	Case tit		Nature of the case	Court or agency		Status of the case			
		Fargo Bank v. Michael Jennifer Dorso 7/15	foreclousure	Supreme Court, Richmo County	ond	☐ Pending ☐ On appea ☐ Conclude			
		ver Bank vs. Discover Bank 07711RI	Judgment	CIVIL COURT OF THE COOR NEW YORK - RI	ITY	Pending On appea			
						Unsatisfie	d - \$9,974.00		
	vs. Am Bank	can Express Centurion Bank nerican Express Centurion 37512RI	Judgment	CIVIL COURT OF THE CITY OF NEW YORK - RI On a					
						Unsatisfie	d - \$1,443.00		
	Colora	of Colorado LLC vs. Cacv Of do Llc 15012RI	Judgment	CIVIL COURT OF THE COOF NEW YORK - RI	ITY	☐ Pending ☐ On appea ☐ Conclude			
						Unsatisfie	d - \$5,487.00		
10.	Check al No.	year before you filed for bankruptc I that apply and fill in the details below Go to line 11. Fill in the information below.	y, was any of your proper	ty repossessed, foreclosed, ç	jarnishe	ed, attached, s	eized, or levied?		
	Credito	r Name and Address	Describe the Property		Date		Value of the		
			Explain what happened				property		
 Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. 		ounts from your							
	Credito	r Name and Address				ction was	Amount		
					taken				
12.		year before you filed for bankrupto pointed receiver, a custodian, or an		ty in the possession of an as:	signee f	or the benefit	of creditors, a		

Del	btor 1 Dorso, Michael J	Case nun	nber (if known)	
Pai	rt 5: List Certain Gifts and Contributions	s		
13.	Within 2 years before you filed for bankru No	uptcy, did you give any gifts with a total value of mor	re than \$600 per person?	
	☐ Yes. Fill in the details for each gift.			
	Gifts with a total value of more than \$600 person	D per Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	Within 2 years before you filed for bankru No	uptcy, did you give any gifts or contributions with a t	total value of more than \$6	600 to any charity?
	☐ Yes. Fill in the details for each gift or co	ntribution.		
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	· ·	Dates you contributed	Value
Pai	rt 6: List Certain Losses			
15.	Within 1 year before you filed for bankrup or gambling? ■ No □ Yes. Fill in the details.	otcy or since you filed for bankruptcy, did you lose a	nything because of theft,	fire, other disaster,
	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pendir insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Por	rt 7: List Certain Payments or Transfers	•		
16.	consulted about seeking bankruptcy or p	otcy, did you or anyone else acting on your behalf pareparing a bankruptcy petition? eparers, or credit counseling agencies for services require		y to anyone you
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Kevin B. Zazzera, Esq. 182 Rose Ave Ste 3 Staten Island, NY 10306-2900	legal fee		\$2,250.00
	greenpath			\$50.00
17.		otcy, did you or anyone else acting on your behalf pa itors or to make payments to your creditors? ou listed on line 16.	ay or transfer any propert	y to anyone who
	No			
	Yes. Fill in the details. Person Who Was Paid	Description and value of any property	Date naument or	Amount of
	Address	Description and value of any property transferred	Date payment or transfer was made	payment

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include

Deb	otor 1	Dorso, Michael J				Case num	nber (if known)	
					_			
	_	and transfers that you have already listed o	n this	statement.				
	_	Yes. Fill in the details.						
				Decembel on and	value of	D	illa annonanto an	Data transfer was
		son Who Received Transfer Iress		Description and property transfer		paym	ents received or debts	Date transfer was made
	Pers	son's relationship to you				paid i	n exchange	
19.	bene	in 10 years before you filed for bankrup ficiary? (These are often called asset-pro			y property to a	self-settled	l trust or similar device o	f which you are a
	Yes. Fill in the details.							
								Date Transfer was
	Haii			Description and	value of the prop	ocity trails	TOTTOG	made
Par	t 8:	List of Certain Financial Accounts, Ins	strum	ents, Safe Deposit	Boxes, and Sto	rage Units		
20.	sold, Inclu	in 1 year before you filed for bankrupto , moved, or transferred? ide checking, savings, money market, c ses, pension funds, cooperatives, assoc	or oth	er financial accour	nts; certificates o	of deposit;		
		No						
		Yes. Fill in the details.						
		ne of Financial Institution and Iress (Number, Street, City, State and ZIP e)		st 4 digits of count number	Type of according trument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	cash	ou now have, or did you have within 1 y , or other valuables?	year k	pefore you filed for	bankruptcy, an	y safe depo	osit box or other deposite	ory for securities,
	■ No							
		Yes. Fill in the details.						
		ne of Financial Institution lress (Number, Street, City, State and ZIP Code)		Who else had acc Address (Number, and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have	you stored property in a storage unit o	or pla	ce other than your	home within 1 y	ear before	you filed for bankruptcy	?
	_	No Yes. Fill in the details.						
		ne of Storage Facility		Who else has or	had access	Doscribo	the contents	Do you still
		ress (Number, Street, City, State and ZIP Code)		to it? Address (Number, 3 and ZIP Code)		Describe	the contents	Do you still have it?
Par	t 9:	Identify Property You Hold or Control	for S	omeone Else				
23.	•	ou hold or control any property that so eone.	meon	ne else owns? Inclu	ide any property	you borro	owed from, are storing fo	r, or hold in trust for
	_							
	_	No Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)			Where is the pro (Number, Street, City, Code)			the property	Value
Par	t 10:	Give Details About Environmental Info	ormat	ion				
		urpose of Part 10, the following definition						
	•	•		. = . #				

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

Case 1-17-45950-cec Doc 1 Filed 11/07/17 Entered 11/07/17 17:10:02

Deb	otor 1	Dorso, Michael J		Case number (if known)	
			_		
	own,	operate, or utilize it, including disposa	al sites.		
		, ,	ironmental law defines as a hazardous w	aste, hazardous substance, toxic su	bstance, hazardous
	mate	rial, pollutant, contaminant, or similar	term.		
Rep	ort all	notices, releases, and proceedings the	at you know about, regardless of when th	ney occurred.	
24.	Has a	ny governmental unit notified you tha	t you may be liable or potentially liable u	nder or in violation of an environmen	ntal law?
		No			
		Yes. Fill in the details.			
		e of site ress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have	you notified any governmental unit of	any release of hazardous material?		
		No			
	_	Yes. Fill in the details.			
		e of site 'ess (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have	you been a party in any judicial or add	ministrative proceeding under any enviro	onmental law? Include settlements ar	nd orders.
	_				
	_	No Yes. Fill in the details.			
		e Title	Court or agency	Nature of the case	Status of the
	Case	e Number	Name Address (Number, Street, City, State and ZIP Code)		case
Par	t 11:	Give Details About Your Business or	Connections to Any Business		
27.	Withi	n 4 years before you filed for bankrup	tcy, did you own a business or have any	of the following connections to any	business?
		☐ A sole proprietor or self-employed i	n a trade, profession, or other activity, e	ither full-time or part-time	
	1	☐ A member of a limited liability comp	pany (LLC) or limited liability partnership	(LLP)	
		☐ A partner in a partnership			
	1	☐ An officer, director, or managing ex	ecutive of a corporation		
	1	\square An owner of at least 5% of the votin	g or equity securities of a corporation		
		No. None of the above applies. Go to I	Part 12.		
		Yes. Check all that apply above and fil	I in the details below for each business.		
		ness Name	Describe the nature of the business	Employer Identification numbe	
	Add: (Num	ber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security	number or IIIN.
				Dates business existed	
28.		n 2 years before you filed for bankrupt utions, creditors, or other parties.	tcy, did you give a financial statement to	anyone about your business? Include	de all financial
		No			
		Yes. Fill in the details below.			
	Nam Addi (Num		Date Issued		
Par	t 12:	Sign Below			

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a

Case 1-17-45950-cec Doc 1 Filed 11/07/17 Entered 11/07/17 17:10:02

Debtor 1	Dorso, Michael	Case n	Case number (if known)				
h a u leu cut		m finas um ta C250 000 au imprisan mant fau um ta 20 years, au hath					
•	§§ 152, 1341, 1519, a	n fines up to \$250,000, or imprisonment for up to 20 years, or both. and 3571.					
/s/ Mich	ael J Dorso						
Michae	l J Dorso	Signature of Debtor 2					
Signatur	e of Debtor 1						
Date N	lovember 7, 2017	7 Date					
Did you a	ttach additional pag	ges to Your Statement of Financial Affairs for Individuals Filing for E	Bankruptcy (Official Form 107)?				
■ No							
☐ Yes							
Did you p	ay or agree to pay s	someone who is not an attorney to help you fill out bankruptcy forn	ns?				
■ No							
☐ Yes. N	ame of Person	Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Sig	nature (Official Form 119).				

Fill in this inf	ormation to identify your case:					rected in this form and	in Form
Debtor 1	Michael J Dorso		12	2A-1S	rbb:		
Debtor 2 (Spouse, if filing)				□ 1. T	here is no presu	umption of abuse	
(Spouse, il lilling)		Naw Vanla Basala		■ 2. T	he calculation to	o determine if a presun	nption of abuse
United State	Eastern District of Division	New York, Brook	ilyn	;	applies will be m	nade under <i>Chapter 7 M</i> cial Form 122A-2).	•
Case number	er					does not apply now bed ut it could apply later.	ause of qualified
				☐ Ch	eck if this is a	n amended filing	
Official	Form 122A - 1					· ·	
	r 7 Statement of Your Cur	rent Mon	thly Inc	omo	е		12/15
a separate she number (if kno military servic Part 1:	e and accurate as possible. If two married people a set to this form. Include the line number to which th wn). If you believe that you are exempted from a p e, complete and file Statement of Exemption from a Calculate Your Current Monthly Income s your marital and filing status? Check one on	e additional informesumption of abu Presumption of Al	mation applies ise because yo	On the	top of any additi	onal pages, write your r consumer debts or beca	name and case use of qualifying
_	married. Fill out Column A, lines 2-11.						
_	ried and your spouse is filing with you. Fill ou			2-11.			
	ried and your spouse is NOT filing with you.			_			
	iving in the same household and are not lega	•			•		
p	iving separately or are legally separated. Fill of senalty of perjury that you and your spouse are lego spart for reasons that do not include evading the N	ally separated un	der nonbankru	iptcy lav	w that applies or		
	average monthly income that you received from all						
	For example, if you are filing on September 15, the 6-m add the income for all 6 months and divide the total by						
own the sa	me rental property, put the income from that property in	one column only.	If you have noth	ing to re	port for any line, v	vrite \$0 in the space.	
				Colur Debte		Column B Debtor 2 or non-filing spouse	
	ross wages, salary, tips, bonuses, overtime, a deductions).	and commission	s (before all	\$	5,666.12	\$	
	y and maintenance payments. Do not include n B is filled in.	payments from a	spouse if	\$	0.00	\$	
of you from an roomma	ounts from any source which are regularly pa or your dependents, including child support. unmarried partner, members of your household, ates. Include regular contributions from a spouse include payments you listed on line 3	Include regular o your dependents,	contributions parents, and	n. \$	0.00	\$	
5. Net inc	ome from operating a business, profession, o				_		
			tor 1				
Gross r	eceipts (before all deductions)	\$ 0.00					
	y and necessary operating expenses	-\$ 0.00	0	Φ.	0.00	•	
	nthly income from a business, profession, or far	n \$	Copy here ->	*	0.00	\$	
6. Net inc	ome from rental and other real property	Doh	tor 1				
0	aggints (hafara all dadustings)	\$ 0.00	tol I				
	eceipts (before all deductions)	-\$ 0.00					
	y and necessary operating expenses nthly income from rental or other real property	\$ 0.00	Copy here ->	> \$	0.00	\$	
	t. dividends. and royalties	*	• •	\$	0.00	\$	

Official Form 122A-1

				Column A Debtor 1		Column B Debtor 2 or non-filing sp	oouse	
8.	Unemployment compensation			\$	0.00	\$		l
	Do not enter the amount if you contend that the amou Social Security Act. Instead, list it here:	unt received was a bene	fit under the	·				
	For you For your spouse	\$	0.00					
	For your spouse	\$						
9.	Pension or retirement income. Do not include any under the Social Security Act.	amount received that w	as a benefit	\$	0.00	\$		
10.	. Income from all other sources not listed above. not include any benefits received under the Social Sea victim of a war crime, a crime against humanity, or If necessary, list other sources on a separate page a	ecurity Act or payments international or domesti	received as	\$	0.00	\$		
	·			\$	0.00	\$		
	Total amounts from concrete name if any			Ψ		\$ \$		
	Total amounts from separate pages, if any.		+	<u> </u>	0.00	<u> </u>		
11.	. Calculate your total current monthly income. Ad each column. Then add the total for Column A to the		\$	5,666.12	 + \$		= \$ 5,60	66.12
							Total current income	monthly
Part	Determine Whether the Means Test Applie	es to You						
12.	. Calculate your current monthly income for the y	ear. Follow these steps	:					
	12a. Copy your total current monthly income from li	·		Conv	line 11 h	ere=>	\$ 5.66	66.12
	12a. Copy your total ourient monthly moonic norm			оору		1010-2	Ψ <u> 3,00</u>	50.12
	Multiply by 12 (the number of months in a yea	r)					x 12	
	12b. The result is your annual income for this part of	the form				12b.	\$ 67,99	93.44
13.	. Calculate the median family income that applies	to you. Follow these st	eps:					
	Fill in the state in which you live.	NY						
	Fill in the number of people in your household.	1						
	Fill in the median family income for your state and s To find a list of applicable median income amounts, form. This list may also be available at the bankrup	, go online using the lin	k specified i	n the separate	e instructi	13. ons for this	\$52,02	24.00
14.	. How do the lines compare?							
	14a. Line 12b is less than or equal to line 1: Go to Part 3.	3. On the top of page 1	, check box	1T,here is no p	resumptio	on of abuse.		
	14b. Line 12b is more than line 13. On the t Go to Part 3 and fill out Form 122A-2.	op of page 1, check bo	x 2Ţhe presi	umption of abo	use is det	ermined by For	m 122A-2.	
Part	t 3: Sign Below							
	By signing here, I declare under penalty of perju	ury that the information of	on this stater	nent and in ar	ny attachm	nents is true and	d correct.	
	V /c/ Michael I Dorce							
	X /s/ Michael J Dorso Michael J Dorso Signature of Debtor 1							
	Date November 7, 2017							
	MM / DD / YYYY							
	If you checked line 14a, do NOT fill out or file	Form 122A-2.						
	If you checked line 14h, fill out Form 1224-2 a	nd file it with this form						

Official Form 122A-1

Dorso, Michael J

Fill in this information to identify your case:	Check the appropriate box as directed in
Debtor 1 Michael J Dorso	lines 40 or 42:
Debtor 2	According to the calculations required by this Statement:
(Spouse, if filing)	Statement.
United States Bankruptcy Court for the: Eastern District of New York, Br Division	rooklyn 1. There is no presumption of abuse.
Case number(if known)	□ 2. There is a presumption of abuse.
	☐ Check if this is an amended filing
Official Form 122A - 2	
Chapter 7 Means Test Calculation	04/16
is needed, attach a separate sheet to this form, Include the line numbe write your name and case number (if known).	ing together, both are equally responsible for being accurate. If more space or to which additional information applies. On the top any additional pages,
Part 1: Determine Your Adjusted Income	
Copy your total current monthly income. Copy I	line 11 from Official Form 122A-1 here=> \$ 5,666.12
2. Did you fill out Column B in Part 1 of Form 122A-1?	
■ No. Fill in \$0 for the total on line 3.	
☐ Yes. Is your spouse Filing with you?	
☐ No. Go to line 3.	
☐ Yes. Fill in \$0 the total on line 3.	
Adjust your current monthly income by subtracting any part of y household expenses of you or your dependents. Follow these step	
On line 11, Column B of Form 122A-1, was any amount of the income you or your dependents?	e you reported for your spouse NOT regularly used for the household expenses of
■ No. Fill in 0 for the total on line 3.	
☐ Yes. Fill in the information below:	
State each purpose for which the income was used For example, the income is used to pay your spouse's tax debt of support other than you or your dependents.	Fill in the amount you are subtracting from your spouse's income
	\$
	\$
Total	\$\$
	Copy total here=> \$0.00
4. Adjust your current monthly income. Subtract line 3 from line 1.	\$5,666.12

Official Form 122A-2

ebtor 1	Dorso, Michael J	Case number (if known)					
art 2	: Calculate Your Deductions from Your I	ncome					
Dec actuand	the questions in lines 6-15. To find the If this form. This information may also be availed duct the expense amounts set out in lines 6-15 reputal expenses if they are higher than the standards also not deduct any operating expenses that you so the expenses differ from month to month, enter the	gardless of your actual expense. In later parts of the form, you will use some of your s. Do not deduct any amounts that you subtracted fro your spouse's income in line 3 subtracted from in income in lines 5 and 6 of form 122A-1.					
5.	The number of people used in determining	your deductions from income					
		ed as exemptions on your federal income tax return, plus the u support. This number may be different from the number of 1 Living 0 Housing					
Nat	ional Standards You must use the IR	2S National Standards to answer the questions in lines 6-7.					
6.7.	fill in the dollar amount for food, clothing, and other items. \$ 639.00						
Peo	pple who are under 65 years of age						
	7a. Out-of-pocket health care allowance per p	erson \$ 49 _					
	7b. Number of people who are under 65	X1					
	7c. Subtotal. Multiply line 7a by line 7b.	\$\$\$49.00					
Peo	ople who are 65 years of age or older						
	7d. Out-of-pocket health care allowance per p	erson \$117_					
	7e. Number of people who are 65 or older	X0					
	7f. Subtotal. Multiply line 7d by line 7e.	\$ Copy here=> +\$ 0.00					
	7g. T otal. Add line 7c and line 7f	\$ 49.00 Copy total here=> \$ 49.00					

Debtor 1	D	orso, Michael J		_	Case number (i	f known)			
Loca	ıl Sta	andards You must use the IRS Local Standards to an	swer the	questions in line	es 8-15.				
		n information from the IRS, the U.S. Trustee Program is into two parts:	has divi	ided the IRS Loc	cal Standard	for housing f	or bankr	uptcy	
■н	ousii	ng and utilities - Insurance and operating expenses							
■н	ousii	ng and utilities - Mortgage or rent expenses							
Тоа	nswe	er the questions in lines 8-9, use the U.S. Trustee Pro	gram ch	art.					
		e chart, go online using the link specified in the separate t may also be available at the bankruptcy clerk's office.	instruct	ions for this form	l.				
		sing and utilities - Insurance and operating expenses dollar amount listed for your county for insurance and oper					ill in \$_		564.00
9.	Hous	sing and utilities - Mortgage or rent expenses:							
		Using the number of people you entered in line 5, fill in listed for your county for mortgage or rent expenses				\$1,6	74.00		
	9b.	Total average monthly payment for all mortgages and oth	er debts	secured by your	home.				
		To calculate the total average monthly payment, add al contractually due to each secured creditor in the 60 mont bankruptcy. Then divide by 60.							
		Name of the creditor	Avera	ge monthly ent					
	-	Rushmore Loan Mgmt Ser	\$	6,755.58					
								_	
		Total average monthly payment	\$	6,755.58	Copy here=>	-\$6,	755.58	Repeat this amount on line 33a.	
	9c.	Net mortgage or rent expense.			J 		_		
		Subtract line 9b (total average monthly paymen) from lin rent expense). If this amount is less than \$0, enter \$0.			\$	0.00	Copy here=>	\$	0.00
10.		ou claim that the U.S. Trustee Program's division of the cts the calculation of your monthly expenses, fill in a				s incorrect and	d d	\$	0.00
	Ехр	olain why:							
11.	Loca	al transportation expenses: Check the number of vehic	les for wi	nich you claim an	ownership or	operating expe	ense.		
	□ 0.	. Go to line 14.							
	□ 1.	. Go to line 12.							
	2	or more. Go to line 12.							
12.		icle operation expense: Using the IRS Local Standards enses, fill in the Operating Costs that apply for your Censu					operating	9 \$	598.00

Dorso, Michael J

13.		ownership or lease expense: Using the IRS Local claim the expense if you do not make any loan or leas cles.						
Ve	hicle 1	Describe Vehicle 1:						
13a.	Owners	hip or leasing costs using IRS Local Standard			\$	485.00		
13b.	-	monthly payment for all debts secured by Vehicle 1. nclude costs for leased vehicles.						
	contract	ulate the average monthly payment here and on line ually due to each secured creditor in the 60 months a wide by 60.						
	Na	me of each creditor for Vehicle 1	Averag payme	e monthly				
	To	yota Motor Credit Co	\$	103.85				
	To	yota Motor Credit Co	\$	103.90				
		Total Average Monthly Payment	\$	207.75	Copy here =>	-\$207	Repeat this amount on line 33b.	
		icle 1 ownership or lease expense t line 13b from line 13a. if this amount is less than \$6 Describe Vehicle 2:	0, enter \$0		\$	277.25	Copy net Vehicle 1 expense here => \$	277.25
13d.	Owners	hip or leasing costs using IRS Local Standard			\$	485.00		
13e.	Average leased v	monthly payment for all debts secured by Vehicle 2. rehicles.	Do not incl	ude costs for				
	Na	me of each creditor for Vehicle 2	Averag payme	e monthly nt				
	-N	ONE-	\$					
		Total Average Monthly Payment	\$	0.00	Copy here => -\$ _	0.00	Repeat this amount on line 33c.	
13f.		icle 2 ownership or lease expense t line 13e from line 13d. if this amount is less than \$6	0, enter \$0		\$	485.00	Copy net Vehicle 2 expense here => \$	485.00
14.		ransportation expense: If you claimed 0 vehicles in ortation expense allowance regardless of whether you			ocal Standar	ds, fill in th <i>€ub</i>	lic \$	0.00
15.	deduct a	nal public transportation expense: If you claimed a public transportation expense, you may fill in what you an the IRS Local Standard for Public Transportation.						0.00

Other Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories. 16. Taxes: The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, self-employment taxes, Social Security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. 1.767.03 Do not include real estate, sales, or use taxes. 17. Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. 424.66 Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. 18. Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance 0.00 on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term. 19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. 0.00 Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. 20. **Education:** The total monthly amount that you pay for education that is either required: as a condition for your job, or 0.00 for your physically or mentally challenged dependent child if no public education is available for similar services. 21. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. 0.00 Do not include payments for any elementary or secondary school education. 22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. 0.00 Payments for health insurance or health savings accounts should be listed only in line 25. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment 0.00 expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted. 4,803.94 24. Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23.

Dorso, Michael J

ebtor 1	Dorso, Michael J	Case number (if known)				
Add	itional Expense Deductions These are additional	deductions allowed by the Means Test.				
	Note: Do not include	any expense allowances listed in lines 6-24.				
25.	i. Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.					
	Health insurance	\$145.17_				
	Disability insurance \$					
	Health savings account	+ \$0.00_				
	Total	\$ 145.17 Copy total here=>	\$	145.17		
	Do you actually spend this total amount?					
	☐ No. How much do you actually spend?					
	Yes	\$				
26.	continue to pay for the reasonable and necessary care a	or family members. The actual monthly expenses that you will and support of an elderly, chronically ill, or disabled member of your unable to pay for such expenses. These expenses may include n. 26 U.S.C.§ 529A(b).	\$	0.00		
27.	27. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply.					
	By law, the court must keep the nature of these expense	es confidential.	\$	0.00		
28.	Additional home energy costs. Your home energy co	sts are included in your insurance and operating expenses on line 8.				
	If you believe that you have home energy costs that are then fill in the excess amount of home energy costs.	more than the home energy costs included in expenses on line 8,				
	You must give your case trustee documentation of your claimed is reasonable and necessary.	actual expenses, and you must show that the additional amount	\$	0.00		
29.	Education expenses for dependent children who ar \$160.42* per child) that you pay for your dependent child elementary or secondary school.	re younger than 18. The monthly expenses (not more than dren who are younger than 18 years old to attend a private or public				
	You must give your case trustee documentation of your reasonable and necessary and not already accounted for	actual expenses, and you must explain why the amount claimed is or in lines 6-23.				
	* Subject to adjustment on 4/01/19, and every 3 years a	fter that for cases begun on or after the date of adjustment.	\$	0.00		
30.		amount by which your actual food and clothing expenses are higher e IRS National Standards. That amount cannot be more than 5% of Standards.				
	To find a chart showing the maximum additional alloware this form. This chart may also be available at the bankru	nce, go online using the link specified in the separate instructions for uptcy clerk's office.				
	You must show that the additional amount claimed is rea	asonable and necessary.	\$	0.00		
31.	Continuing charitable contributions. The amount the instruments to a religious or charitable organization. 26	at you will continue to contribute in the form of cash or financial U.S.C. § 170(c)(1)-(2).	+\$	0.00		
32.	Add all of the additional expense deductions. Add lines 25 through 31.		\$	145.17		

	ections for Debt Payment							
	or debts that are secured by an interest nd other secured debt, fill in lines 33a	st in property that you own, including home through 33e.	mortga	ages, veh	icle loa	ns,		
	o calculate the total average monthly paym ne 60 months after you file for bankruptcy.	nent, add all amounts that are contractually due Then divide by 60.	to each	secured o	reditor i	n 		
	Mortgages on your home:						Averag payme	e monthly nt
3a.	Copy line 9b here					=> \$	·	6,755.58
	Loans on your first two vehicles:							
3b.	Copy line 13b here					=> \$		207.75
Зc.	Copy line 13e here					=> \$		0.00
3d.	List other secured debts:							
ame	e of each creditor for other secured debt	Identify property that secures the debt		inclu	paymen de taxes ance?			
					No			
	Discover	Secured property			Yes	9	;	24.05
		_				•		
	Santander Bank NA	Secured property		_	No			665.27
	Santanuer Bank NA	Secured property		_ 🗆	Yes	\$		
					No			
	Santander Bank NA	Secured property			Yes	\$;	665.27
_				0.0	47.00	Copy		0.04=.00
Be.	Total average monthly payment. Add lin	nes 33a through 33d	\$_	8,3	17.92	here=	> \$_	8,317.92
		secured by your primary residence, a vehic ort or the support of your dependents?	le, or					
	No. Go to line 35.							
		pay to a creditor, in addition to the payments ur property (called the <i>cure amount</i>). Next, dividue.						
		Identify property that secures the debt		Total cu				nthly cure ount
Nam	ne of the creditor						φ	
	of the creditor		\$	3		÷ 60 =	Ψ	
				S		÷ 60 =	Ψ	
			\$ \$			Сору	Ψ	
		Tot	tal \$	S	0.00			0.
		Tot		S		Copy		0.
NC	ONE-	a priority tax, child support, or alimony - th	al \$			Copy		0.1
NC	DNE-	a priority tax, child support, or alimony - th	al \$	3		Copy		0.

Total amount of all past-due priority claims

0.00

0.00 ÷ 60 = \$

ebtor 1	Dors	so, Michael J		Case r	umber (<i>if knowr</i>	n)		
Fo	or more	eligible to file a case under Chapter 13? 11 U.S.C. § 1 information, go online using the link fo <i>Bankruptcy Basic</i> ns for this form. <i>Bankruptcy Basics</i> may also be available	s specified		ce.			
	l _{No.}	Go to line 37.						
		Fill in the following information.						
		Projected monthly plan payment if you were filing under 0	Chapter 13	\$				
		Current multiplier for your district as stated on the list iss Administrative Office of the United States Courts (for di and North Carolina) or by the Executive Office for United all other districts).	istricts in A	labama				
		To find a list of district multipliers that includes your dist link specified in the separate instructions for this form. available at the bankruptcy clerk's office.				Co	py total	
		Average monthly administrative expense if you were filing	g under Ch	apter 13	\$	her	re=> \$	
		of the deductions for debt payment. ss 33e through 36.					\$	8,317.92
Total	Deduc	tions from Income						
38. A	dd all o	of the allowed deductions.						
		ne 24,All of the expenses allowed under IRS e allowances	\$	4,803.94				
	•	ne 32, All of the additional expense deductions	\$	145.17				
		ne 37, All of the deductions for debt payment	+\$					
`	ору ш	ie 31, Air or the deductions for debt payment		8,317.92	٦			
		Total deductions	\$	13,267.03	Copy total	here	=> \$	13,267.03
art 3:	Det	termine Whether There is a Presumption of Abuse			_			
39. C	alculate	e monthly disposable income for 60 months						
3	39a. Co	ppy line 4, adjusted current monthly income	\$	5,666.12				
3	39b. Co	py line 38, <i>Total deductions</i>	- \$	13,267.03				
	39c. Mc	onthly disposable income. 11 U.S.C. § 707(b)(2). btract line 39b from line 39a	\$	0.00	Copy here=>\$		0.00	
F	or the	next 60 months (5 years)				x 60		
3	39d. To	otal. Multiply line 39c by 60		\$	0.00	Copy here=>	\$	0.00
40. Fi	nd out	whether there is a presumption of abuse. Check the b	oox that ap	pplies:		J	L	
	The I	ine 39d is less than \$7,700*. On the top of page 1 of this	s form, che	eck box 1, There is	no presump	otion of abu	se. Go to Part 5	i.
	The I	ine 39d is more than \$12,850*. On the top of page 1 of to claim special circumstances. Go to Part 5.						
Г		ine 39d is at least \$7,700*, but not more than \$12,850	*. Go to lin	e 41.				
		to adjustment on 4/01/19, and every 3 years after that for o			e of adjustm	ent		

Debtor 1	Dors	so, Michael J	Case number (if known)
41.	41a.	Fill in the amount of your total nonpriority unsecured debt. If you filled on Summary of Your Assets and Liabilities and Certain Statistical Information Schedules (Official Form 106Sum), you may refer to line 3b on that form.	ut <i>A</i> 41a. \$ X .25
		25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(i)(Multiply line 41a by 0.25	
of	your ı	ne whether the income you have left over after subtracting all allowed decunsecured, nonpriority debt. e box that applies:	ductions is enough to pay 25%
		39d is less than line 41b. On the top of page 1 of this form, check box 1, <i>Ther</i> p Part 5.	re is no presumption of abuse.
		39d is equal to or more than line 41b. On the top of page 1 of this form, chece. You may fill out Part 4 if you claim special circumstances. Then go to Part 5	
Part 4:	Giv	ve Details About Special Circumstances	
reaso	onable	ve any special circumstances that justify additional expenses or adjustment alternative? 11 U.S.C. § 707(b)(2)(B). To to Part 5.	ents of current monthly income for which there is no
□ Y		I in the following information. All figures should reflect your average monthly exposu may include expenses you listed in line 25.	ense or income adjustment for each item.
	ne	ou must give a detailed explanation of the special circumstances that make the excessary and reasonable. You must also give your case trustee documentation of justments.	
	G	ive a detailed explanation of the special circumstances	Average monthly expense or income adjustment
	_		\$
	_		\$
			\$
			\$
Part 5:	Sic	n Below	
	,	gning here, I declare under penalty of perjury that the information on this stateme	ent and in any attachments is true and correct.
	X /s	/ Michael J Dorso	
	M	ichael J Dorso	
Da		gnature of Debtor 1 Dvember 7, 2017	
50	MI	M/DD/YYYY	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Ch	apter 7:	Liquidation	
	\$245	filing fee	
	\$75	administrative fee	
+	\$15	trustee surcharge	
	\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:
http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 1-17-45950-cec Doc 1 Filed 11/07/17 Entered 11/07/17 17:10:02

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of New York, Brooklyn Division

	Eastern District	t of New York, Brooking	yn Division		
In re	Dorso, Michael J	Debtor(s)	Case No.	7	
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	NSATION OF ATTO	ORNEY FOR I	DEBTOR	
(Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(becompensation paid to me within one year before the filing per rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy	, or agreed to be pai	d to me, for services re-	
	For legal services, I have agreed to accept		\$	2,250.00	
	Prior to the filing of this statement I have received		\$	2,250.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. 7	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	I have not agreed to share the above-disclosed comper firm.	nsation with any other person	n unless they are men	mbers and associates of	my law
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name				nw firm. A
5.	In return for the above-disclosed fee, I have agreed to rend	der legal service for all aspec	cts of the bankruptcy	case, including:	
l c	 Analysis of the debtor's financial situation, and rendering Preparation and filing of any petition, schedules, staten Representation of the debtor at the meeting of creditors [Other provisions as needed] 	nent of affairs and plan whic	h may be required;	-	ruptcy;
6. l	By agreement with the debtor(s), the above-disclosed fee of	does not include the following	ng service:		
		CERTIFICATION			
	certify that the foregoing is a complete statement of any anakruptcy proceeding.	agreement or arrangement fo	or payment to me for	representation of the de	ebtor(s) in
	ovember 7, 2017	/s/ Kevin Zazzera	1		
D	ate	Kevin Zazzera Signature of Attorne	21		
		Kevin B. Zazzera			
		182 Rose Ave Sto Staten Island, NY			
		kzazz007@yahod	o.com		
		Name of law firm			